



**DEBORAH GILLIS AND
LEILANI MAE RESCUE INC
LIABILITY RELEASE, EXPRESS ASSUMPTION OF RISK
AND RELEASE OF RIGHT TO SUE**

This release may be used against you in a court of law if you sue any released party or person. Please read carefully, fill in all blanks and INITIAL each paragraph before signing.

I, _____, hereby affirm that I am aware of the inherent risks of equine activity, including horseback riding. I understand and agree that I, my heirs and my assigns may not hold responsible Deborah Gillis, owner; and Leilani Mae Rescue located at 9248 East Reeves Bridge Rd in Linden, NC, responsible in any way for injury, death or other damages to me, my family, my property, my heirs, or assigns that may occur as a result of engaging in an equine activity or as a result of the negligence of any party, whether active or passive.

_____ In consideration of being allowed to participate in this equine activity, I hereby personally assume all risks in connection with said activity, for any harm, injury or damage that may befall me or my property while so engaged, including all risks connected therewith, whether foreseen or unforeseen.

_____ I save and hold harmless said activity and Deborah Gillis and Leilani Mae Rescue from any claim or lawsuit by me, my family, estate, heirs or assigns arising out of my participation in this equine activity, including both claims arising during the activity and/or afterwards.

_____ I understand that equine activities may be physically strenuous and that I may exert myself during this activity.

_____ I understand the inherent risks of equine activities (or those dangers or conditions that are an integral part of engaging in equine activities) include, but are not limited to, (a) the possibility of an equine to behave in ways that may result in injury, harm, or death to persons on or around them, and (b) the unpredictability of an equine's reaction to such things as sounds, sudden movement, unfamiliar objects, persons and other animals.

_____ I understand that equine may behave in unpredictable and potentially dangerous ways. _____ I have honestly and accurately expressed my equine ability so that my ability to engage safely in this equine activity or to safely manage a particular equine can be assessed.

_____ I expressly assume the risk of injuries resulting from my participation in these activities, and I will not hold Deborah Gillis and Leilani Mae Rescue INC responsible in any way.

Print and Sign Full Name below:

Print Name: _____ Sign: _____

Date _____

Continued on next page – *Printed form must be printed on one sheet of paper two-sided.*

_____ I further state that I am of lawful age and am legally competent to sign this liability release.

_____ I understand that the terms and conditions of this release are contractual and not a mere recital, and that I have signed this document of my own free act.

_____ I understand that this Liability Release, Express Assumption of Risk and Release of Right to Sue will be kept on file and is binding for one year from date entered into or the end of the current calendar year, whichever comes first.

**NORTH CAROLINA EQUINE LIABILITY LAW
WARNING**

Under North Carolina law an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in equine activities resulting exclusively from the inherent risks of equine activities. Chapter 99E of the North Carolina General Statutes.

I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS LIABILITY RELEASE, EXPRESS ASSUMPTION OF RISK AND RELEASE OF RIGHTS TO SUE BY READING IT BEFORE I SIGNED IT ON BEHALF OF MYSELF AND MY HEIRS.

This Liability Release, Express Assumption of Risk and Release of Right To Sue shall be in full force and effect from the date of signing through the calendar year. The participant must sign a new Liability Release, Express Assumption of Risk and Release of Right To Sue at the beginning of each calendar year.

Signature of Adult Participant or Parent/Guardian of underage Participant.

Sign: _____ Date _____

Print Name: _____

Name and Age of Underage Participant

Name: _____ Age _____

Note: You must fill out a separate Liability Release, Express Assumption of Risk and Release of Right to Sue for each participant in the equine activity.

Emergency Contact: _____

THIS FORM MUST BE PRINTED ON A SINGLE SHEET OF PAPER AS A TWO-SIDED FORM.