

FLORIDA TRAIL BLAZERS, INC. a/k/a "FTB"

**Participant(s) Release/Waiver/Hold Harmless/Indemnity Agreement
For Club sponsored activities for membership year 200__**

Please Read Carefully Before Signing. READ and initial each paragraph and sign at bottom.
(An adult parent, legal guardian or legal representative, or responsible party must initial and sign if any participant is under age 18.)

Event/Activity Sponsors and Club Administrators DO NOT Assure Your Safety!

_____ I acknowledge that I am an adult participant/ parent/ legal representative or guardian for a minor or am acting as a host/hostess and am
Initials the responsible party for any guest participant(s) and I will be responsible for any and all costs/damages incurred by any participant(s)
or any participant's family members for all sums, injuries or property damage that I or my guest(s) or family may incur, and that I have

_____ I acknowledge that I will be responsible for my/our negligent acts, the negligent acts of my guests and family members and/or legal
Initials wards and for the acts of any animals that we bring. I/we carry personal liability insurance coverage which is now in full force and effect
and will indemnify FLORIDA TRAIL BLAZERS, INC. a/k/a FTB, any sponsor, their owners, their officers, directors, members,

_____ I acknowledged that all participants and guests should wear ASTM- standard/SEI- certified equestrian helmets while participating in
Initials equine activities. I am understand that the wearing of such headgear while participating in equine activities may reduce the severity of
participants head injuries in the event of a fall or other equestrian related accident.

_____ I acknowledge that my guests/family and I are participating in a FTB activity totally at our own risk for injuries or property damage that
owners, their officers, directors, members, affiliated organizations and others acting on their behalf from any claims, legal liability, legal
actions or rights for _____ damages, for any accident or injuries which may occur to me/us or our animals at this activity and/or event. This
agreement is made to Initials waive any legal claims that I/we may have any right to bring against FLORIDA TRAIL BLAZERS, INC. a/k/a FTB,
any sponsor, their owners, their officers, directors, members, affiliated organizations and others acting on their behalf to the fullest extent allowed
by law. This agreement also is made to indemnify and fully protect FLORIDA TRAIL BLAZERS, INC. a/k/a FTB, any sponsor, their owners,

_____ I have been advised to read or have read the provisions of Chapter 773 of the Florida Statutes dealing with Equine Activities. I
Initials understand an Equine Activity Sponsor is not liable for any injury to or the death of a participant resulting from the inherent risks of
equine activities and no participant nor any participant's representative shall have any claim against or recover from any equine activity

The undersigned as a participant/parent/legal guardian or legal representative/agent/responsible party, being of legal age and fully competent to contract, have read and understand this agreement and have initialed each of the above paragraphs for the purposes and intent expressed above.

DATED in Seminole County, Florida this _____ day of _____, 200__

Print/type name of participant.

Signature of adult participant/ parent/ guardian or legal Representative/Agent

Print/type name of participant.

Signature of adult participant/ parent/ guardian or legal Representative/Agent

Print/type name of participant.

Signature of adult participant/ parent/ guardian or legal Representative/Agent

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