

# Fair Hill Stables, LLC

## General Release – Waiver of Liability



I/WE/PARENTs of \_\_\_\_\_ (if minor, age \_\_\_\_\_), understand and assume the risk of all and any injury that may occur to ME/US/OUR CHILD, and property during, prior to or after any equine activities held at the property known as Fair Hill Natural Resources Management Area (“Fair Hill”), located in Cecil County, Maryland. Said property consisting of approximately 5,300 acres of open and wooded lands and owned by the State of Maryland and used by Fair Hill Stables, LLC for trail riding, riding lessons, clinics/camps, boarding, hay rides, carriage rides, and other related equine activities.

I/WE understand and acknowledge that any involvement with horses can be extremely dangerous. I/We voluntarily and expressly assume all liability and risks knowing fully the possibility of injury, regardless of the cause of such injury.

In consideration of having been forewarned of the possibilities of injury that may occur as a result of any activities, either precedent to, during or after any equine activities at Fair Hill as described above I/WE do agree by this instrument not to sue Fair Hill Stables, LLC or the State of Maryland, its agencies, agents or employees. I/We or heirs waive and release any and all claims arising out of such equine activities or the use of such property, including, but not limited to, claims alleging negligence, strict liability, breach of contract, loss of severance of Fair Hill Stables, LLC or the State of Maryland. This agreement to not sue includes claims for bodily injury, property damage, death or any other claim that I/We and my/our heirs may have against Fair Hill Stables, LLC or the State of Maryland.

### **Sanctioned riding helmets are required to be worn at all times.**

I/We also acknowledge and agree that I/We have, or it is our responsibility to obtain and keep in force, sufficient insurance coverage (including, but not limited to, liability, health and life) to protect me/us from any expense, liability claims, or damages mentioned or included in this agreement, and that whether or not I/We obtain such insurance and whether or not such insurance is sufficient, the provision above shall be fully effective and enforceable and we will be bound and there under.

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Rider/Participant

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Signature of Parent (on behalf of both if rider is under 18)

\_\_\_\_\_  
Witness