

# Release of Liability, Covenant Not To Sue, and Hold Harmless Agreement

## Pletch Equestrian Center

9712 E 350 S  
Lafayette, IN 47905

**\*\*WARNING\*\* Under Indiana law, an equine professional is not liable for an injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities.**

**I UNDERSTAND AND AGREE THAT HORSEBACK RIDING IS AN EXTREMELY DANGEROUS ACTIVITY AND THAT HORSES ARE INHERENTLY DANGEROUS. NO HORSE IS A COMPLETELY SAFE HORSE. I ASSUME SOLE RESPONSIBILITY FOR THE SAFETY OF MYSELF AND THOSE I BRING TO THE STABLES/PROPERTY WITH ME.**

**LIABILITY RELEASE** In consideration of this stable allowing my participation in this activity, under the terms set forth herein, I, the boarder/owner/rider, do agree to hold harmless and release this stable, its owners, agents, employees, officers, members, premises owners, insurers, and affiliated organizations from legal liability due to this stables ordinary negligence and I do further agree that I shall bring no claims, demands, actions, and causes of action , and/or litigation against this stable and its associated as stated above in this clause, for any economic and non-economic losses due to bodily injury, death, property damage, or loss, sustained by me and/or my associates in relation to the premises and operations of this stable, to include while riding, handling, competing, or otherwise being near horses owned by or in the care, custody, and control of anyone in this stable.

By my signature below, I indicate my understanding that horses are inherently dangerous, and that I absolve the property owner of all legal, medial, and civil liability for any injuries that I, or someone I have brought to the property, sustain on or off the owner's property. I explicitly hold harmless and absolve the property owner from any liability.

Signer Statement of Awareness

**I, THE UNDERSIGNED HAVE READ AND DO UNDERSTAND THE FOREGOING AGREEMENT AND LIABILITY RELEASE.**

Signature of Rider (or Parent/Guardian): \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_