MORAGA HORSEMEN

RELEASE OF LIABILITY

For any and all activities from February 1, 2024 to February 1, 2025

PARTICIPANT 1:	TELEPH	IONE: ()
PARTICIPANT 2:	TELEPH	IONE: ()
ADDRESS:	CITY:	ZIP:
I acknowledge that horseback riding is a spor I knowingly assume all risks, whether known		amage to myself, my horse and property.
I hereby release the <i>Moraga Horsemen's Assa</i> (premises owners) (hereinafter referred to as of <i>MHA</i> and/or <i>EBMUD</i> or any of its agents.		
	rs, executors and assigns from any and all cla	and discharge <i>MHA</i> and <i>EBMUD</i> directors, officers, ims of liability for injury or damage to myself, my ecutors, heirs and assigns.
· · · · · · · · · · · · · · · · · · ·		A general release does not extend to claims which ase, which if known by him might have materially
I agree that I will indemnify and hold harmle demands, and causes of action, including cou prosecuted for my benefit, in which this relea	rt costs and actual attorney fees, arising from	
MHA and EBMUD its agents or employees shrunning away, state of health, injury to person		occur from any cause or as a result of fire, theft,
I acknowledge that I have read this Release o	f Liability and know and understand its conto	ents.
Signature 1		Date:
Signature 2:		
MINORS DO NOT SIGN THIS FORM - PAR	ENT OR LEGAL GUARDIAN MUST COM	IPLETE THIS SECTION
I, the undersigned parent or guardian of the above par Release of Liability shall be binding as to damage or i		in the event, agree that the terms and conditions of this , out of his participation in events.
I acknowledge that I have read this Release of Liab	pility and know and understand its contents.	
NAME:	TELE	PHONE: ()
ADDRESS:	CI7	ΓΥ:
SIGNATURE:	J	DATE: