

Horseback Riding Waiver

MIAMI VALLEY COUNCIL

BOY SCOUTS OF AMERICA

WOODLAND TRAILS SCOUT RESERVATION

HORSEBACK RIDING ASSUMPTION OF RISK, RELEASE AND INDEMNITY

YOU CANNOT PARTICIPATE IN HORSE RANCH ACTIVITIES WITHOUT THIS FORM

(A separate form must be completed for each adult or minor)

I or **THE MINOR IDENTIFIED BELOW** who is less than 18 years of age of whom I am the parent or guardian, want to participate in Horse Ranch Activities (including, but not limited to, activities in and around the horse ranch, trail rides, corral rides, overnight rides, and ranch management activities) at Woodland Trails Scout Reservation on (dates at camp) _____ provided by or through the "Miami Valley Council." The term "Miami Valley Council" includes the Miami Valley Council, Boy Scouts of America, its principals, directors, officers, agents, employees, volunteers and executive board members). I or the minor agree to abide by all safety instructions, and to wear any safety equipment provided to me or the minor in connection with the Horse Ranch Activities. I, for myself and my minor, hereby acknowledge the risks of bodily injury, illness, paralysis, death, and loss or damage to personal property which may occur in connection with horseback riding and other activities which involve live animals.

In consideration of and as part payment for participation by me or the minor in Horse Ranch Activities, I ASSUME, for myself and my minor, to the greatest extent permitted by law, all of the risks to me or to the minor, whether or not specifically identified herein, of all of the activities in which I or the minor participate; I RELEASE the Miami Valley Council and all other participants from any and all liability to me, or to the minor, including, but not limited to, liability arising from anyone's negligence, gross negligence and/or willful and wanton conduct; and I WILL INDEMNIFY AND HOLD HARMLESS the Miami Valley Council from any and all costs, liabilities and claims, of every kind and nature whatsoever, arising, directly or indirectly, from my or the minor's participation in Horse Ranch Activities, including any legal costs and expenses and the costs of any medical or other expenses incurred for my or the minor's benefit.

ADULT

Adult Signature: _____ Date: _____

Print Name: _____

MINOR (SCOUT)

Relationship of Adult Above: _____

Signature of Minor: _____ Date: _____

Print Name of Minor: _____

Phone: _____ Troop: _____ Council: _____

Address: _____ City: _____ State: _____ Zip: _____