EQUINE RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

Name of Participant: _____
Address: _____
Telephone: _____
Emergency Contact: _____ Phone: _____

I hereby enter into this agreement in consideration of my ability and permission to ride OR use any Horse owned or leased by THE ABBOTT FAMILY, RYLEE ABBOTT, MALACHI DRAGGES, THE CHEVAL FOUNDATION, JOHNATHAN WOODS and OHIANA NEGRETE (Name of Horse Owners, Name of Horse Trainer, Name of the Organization, Name of the Property Owners) ("Owner") whose stable address is 3921 NW 6th St. Newcastle Oklahoma,73065.

IMPORTANT NOTICE

BY SIGNING THIS AGREEMENT YOU ARE GIVING UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO RECOVER DAMAGES IN CASE OF INJURY, DEATH, OR PROPERTY DAMAGE, ARISING OUT OF YOUR RIDING OR USE OF THE OWNER'S HORSE AND/OR PARTICIPATION IN EQUINE ACTIVITIES AT (NAME OF THE HORSE OWNER, NAME OF THE HORSE TRAINER, NAME OF THE ORGANIZATION, NAME OF THE PROPERTY OWNERS) THE ABBOTT FAMILY, RYLEE ABBOTT, MALACHI DRAGGES, THE CHEVAL FOUNDATION, JOHNATHAN WOODS and OHIANA NEGRETE, INCLUDING INJURY, DEATH, OR PROPERTY DAMAGE ARISING OUT OF THE NEGLIGENCE OF YOU OR THE ABBOTT FAMILY, RYLEE ABBOTT, MALACHI DRAGGES, THE CHEVAL FOUNDATION, JOHNATHAN WOODS and OHIANA NEGRETE. READ THIS AGREEMENT CAREFULLY BEFORE SIGNING IT. YOUR SIGNATURE INDICATES YOUR UNDERSTANDING OF AND AGREEMENT TO ITS TERMS.

By signing this form, I hereby acknowledge on behalf of myself that I have familiarized myself with the activities that I will be allowed to participate in, and that I do hereby acknowledge and agree that I will participate in these activities without restriction or limitation. I recognize the inherent risks involved in riding and working with horses, including but not limited to:

_ Bites, kicks, abrasions or contusions from horses.
_ Falling off or being thrown or bucked off of horses.
_ Scratches or other injury from stalls or enclosures.
_ Scratches or other injury from grooming tools and other equine equipment & tack.
_ Allergic reactions to animals, hay, or other allergens.
_ Tripping in holes or on materials or equipment.
_ Slipping, falling, or otherwise being injured in the barn, in stalls, or on the grounds, which can be slippery, muddy, wet, or contain or present other hazards.

(Initial) _____

I hereby specifically forever waive and release THE ABBOTT FAMILY, RYLEE ABBOTT, MALACHI DRAGGES, THE CHEVAL FOUNDATION, JOHNATHAN WOODS and OHIANA NEGRETE and its members, principals and agents from any liability for injury arising out of the inherent risks from riding, working or participating in a stable environment and/or with horses, as well as from the active negligence of THE ABBOTT FAMILY, RYLEE ABBOTT, MALACHI DRAGGES, THE CHEVAL FOUNDATION, JOHNATHAN WOODS and OHIANA NEGRETE its members,

principals and agents.

(Initial) _____
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EQUINE RELEASE AND WAIVER OF LIABILITY,
ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

By signing this agreement I hereby acknowledge that although there may be supervision during my time spent at WOODS/NEGRETE'S property, there will not be a nurse on the premises and THE ABBOTT FAMILY, RYLEE ABBOTT, MALACHI DRAGGES, THE CHEVAL FOUNDATION, JOHNATHAN WOODS and OHIANA NEGRETE and its principals and agents bear no responsibility for health or medical care.

I agree to indemnify, save and hold harmless THE ABBOTT FAMILY, RYLEE ABBOTT, MALACHI DRAGGES, THE CHEVAL FOUNDATION, JOHNATHAN WOODS and OHIANA NEGRETE and its principals and agents from and against any loss, liability, damage, attorneys' fees, or costs that they may incur arising out of or in any way connected with either my presence or participation at WOODS/NEGRETE'S property or any acts or omissions of THE ABBOTT FAMILY, RYLEE ABBOTT, MALACHI DRAGGES, THE CHEVAL FOUNDATION, JOHNATHAN WOODS and OHIANA NEGRETE principals or agents. By signing this Agreement, and by initialing each paragraph, I hereby acknowledge my complete understanding, agreement and consent to my presence and/or participation in the activities at WOODS/NEGRETE'S property without restriction, without liability to THE ABBOTT FAMILY, RYLEE ABBOTT, MALACHI DRAGGES, THE CHEVAL FOUNDATION, JOHNATHAN WOODS and OHIANA NEGRETE its principals or agents, and with full knowledge and understanding of the disclosures, waivers, and releases herein.

(Initial) _____

If I am present at and participate in the activities at WOODS/NEGRETE'S property, or with THE CHEVAL FOUNDATION, I do so at my own risk, and I hereby acknowledge and agree that THE ABBOTT FAMILY, RYLEE ABBOTT, MALACHI DRAGGES, THE CHEVAL FOUNDATION, JOHNATHAN WOODS and OHIANA NEGRETE and/or any of its principals and agents shall bear no responsibility or risk associated with injuries that could arise from my presence or participation at the WOODS/NEGRETE'S property.

I have received a copy of the Ranch Policies.
(Initial) _____

Name: _____ Date:_____

Participant's Signature: _____
(or parent of minor child)