

**GENERAL RELEASE, VOLUNTARY WAIVER OF LIABILITY, AND
INDEMNITY AGREEMENT
(Participants Age 18 or over)**

I have requested permission from Florence and Jean-Marc Germain, the owners ("Owners") of AOPF Stables, LLC ("Stables") and Indian Run Partners, LLC ("Farm"), to participate in various horse's related activities on and around the Farm, including but not limited to boarding horses, caring for horses, riding, exercising, training, and taking horse riding lessons (from both employees of the Stable and third party instructors not employed by the Stable). ("Activities").

In consideration of Owners' grant of permission to participate in the Activities, I, for myself, my personal representatives, heirs, next of kin, spouse, guardians, legal representatives and assigns, DO HEREBY:

1. Understand that my participation in the Activities contains DANGER AND RISK OF INJURY OR DEATH to horse, rider or spectator, and that there is INHERENT DANGER IN THESE ACTIVITIES WHICH I APPRECIATE AND VOLUNTARILY ASSUME. I have observed the Activities, and I know as well that other participants pose a danger to me. Nevertheless, I VOLUNTARILY ELECT TO ACCEPT ALL RISKS connected with my participation in the Activities; and

2. RELEASE AND DISCHARGE the Owners, their heirs, personal representatives and assigns, as well as any employees, agents, guests and other persons on or in any ways affiliated with the Farm (the "Releasees"), from any and all claims and liabilities arising out of my participation in the Activities on or about the Farm, including the actions or omissions of Releasees or any other participant in the Activities which cause the undersigned injury, death or property damage, regardless of the legal basis for any such claim or liability. I hereby covenant and agree to indemnify Releasees and hold them harmless from and against any and all claims, actions, judgments and expenses (including reasonable attorney's fees) which Releasees may incur arising out of my participation in the Activities.

This agreement shall be governed by the laws of Maryland. I agree that this agreement is intended to be as broad and inclusive as is permitted by law and that if any portion of this agreement is held invalid or unenforceable, the remainder of the agreement shall continue in full legal force and effect.

I FURTHER CERTIFY AS FOLLOWS: (i) I HAVE READ THIS DOCUMENT; (ii) I UNDERSTAND IT IS A FULL RELEASE OF ALL CLAIMS; and (iii) I UNDERSTAND THAT I ASSUME ALL RISKS OF THE ACTIVITIES.

I VOLUNTARILY SIGN MY NAME, EVIDENCING MY ACCEPTANCE OF THE ABOVE PROVISIONS.

DATE : _____

Signature: _____

Print Name: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Veterinarian: _____
