

HIGHLAND COUNTY FAIR ASSOCIATION
EQUINE ACTIVITY LIABILITY WAIVER AND CERTIFICATION FORM

In consideration of my participation in an equine activity at The Highland County Fair, I hereby release and waive my rights to sue The Highland County Fair Association, the Fair Horse Show Committee, and any volunteers or Fair Staff, for any loss, damage, injury or death to person or property sustained by me in equine activities.

I specifically acknowledge and understand the risks and dangers inherent in participation in an equine activity including, but not limited to, the following: (i) the propensity of an equine to behave in dangerous ways which may result in injury to the participant; (ii) the inability to predict an equine's reaction to sound, movements, objects, persons, or animals; (iii) hazards of surface or subsurface conditions, whether known or unknown; (iv) the experience level of any participant; (v) a known or unknown health condition of any participant; and (vi) the condition and age of the equipment or tack. I am familiar with the Horse Protection Act and certify by signing this that I have not used and will not use any banned substance, any illegal tack, or sored my horse prior to and during this equine activity. I assume all of the foregoing risks and responsibility for making any and all examinations or inspections relating to those risks and any other potential risks of recreational activities, and I agree and understand that The Highland County Fair Association and the Fair Horse Show Committee and volunteers shall have no responsibility whatsoever to make any such examinations or inspections, although I agree to allow my mount to be examined at any time.

This release form is entered into by me freely and voluntarily, pursuant to Virginia Code § 3.2-6200 through 3.2-6203 and I waive my rights to sue for and assume all risks of injury or death to the fullest extent allowed by the Virginia Code. I further certify that The Highland County Fair Association and the Fair Horse Show Committee and volunteers are relying upon the foregoing statements and representations in permitting me to participate in any equine activities. I understand that this waiver, release and certification shall remain valid until I have expressly revoked it.

_____/	_____/	
Date	Participant Print	Participant Sign

If participant is a minor, the parent or legal guardian must also read and execute this form.

_____	_____
Date	Parent/Legal Guardian and Child's Name