

## Release of Liability

I, the undersigned, wish to participate in the Western Michigan Appaloosa Regional (W.M.A.R.) event on June 5-6 2021, and June 19-20 2021 and the Michigan Appaloosa Horse Association, Inc. (M.Ap.H.A.) and Western Michigan Appaloosa Regional (W.M.A.R.) event on August 7-8 202. I understand that during portions of these events I will be in close proximity to one or more horses under circumstances which may expose me to some risk of injury, because of the nature of horses, the facility, and the activities in which I will be engaged.

In consideration of the M.Ap.H.A and W.M.A.R. allowing my participation in these events, I, on behalf of myself, and my heirs, administrators, personal representatives, assigns and children and spouse, if any, do hereby agree to hold harmless, release and discharge the M.Ap.H.A. and W.M.A.R., which includes its officers, directors, members, agents, representatives, affiliates and insurers, of and from all claims, demands, causes of action and legal liability whether known or unknown, anticipated or unanticipated, due to the ordinary negligence of the M.Ap.H.A or W.M.A.R. I shall not bring any claims, demands, legal actions or causes of action against the M.Ap.H.A. or W.M.A.R. for any damage or loss due to bodily injury, death, property damage or illness contracted from a communicable disease arising out of my participation in these events.

### WARNING

**Under the Michigan equine activity liability act, an equine professional is not liable for an injury to or the death of a participant in an equine activity resulting from an inherent risk of the equine activity.**

### **Social Distancing**

- I understand that I am responsible for my own health and safety, and I am responsible for providing any personal protection equipment that I wish to use, including face coverings, gloves and hand sanitizer.
- I will, to the best of my ability, practice proper social distancing by maintaining six feet of distance from others who are not members of my household as required by Governor Whitmer's Executive Orders. I will practice good hygiene (hand washing, use of sanitizer, wearing of a mask if and when required) and follow other public health recommendations.
- I will not ride in groups closer than six feet and will practice social distancing in all areas, including the warm up arena, holding areas, stabling and camping areas.
- I have not been diagnosed with COVID-19 within the last 14 days. If I have been infected by COVID-19 at any time, I have been medically released to return to normal activities.
- If I develop a fever or any other symptoms, such as a cough or difficulty breathing, or if I am diagnosed with COVID-19 within 14 day of this event, I will report this information to the Michigan Appaloosa Horse Association.

Signature of Participant \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_  
(If participant is a minor)