

# TULIPSPRINGS EVENTING

## General Agreement & Release of Liability

I, \_\_\_\_\_ (Must be a Parent or Guardian if person named above is under the age of 18), hereby acknowledge that I have requested permission to participate in equestrian or other activities on the premises of **Tulipsprings**. I have read and agree to abide by the Tulipsprings Facility Use Rules.

I am aware that combined training and eventing, jumping, trail riding, conditioning, polo and all other forms of equestrian activities, including the teaching, training or coaching thereof can be hazardous. I am voluntarily participating in equestrian or other activities with the knowledge of the danger involved and hereby agree to accept any and all risks of injury or death.

In consideration for being permitted to use the facilities at the *Tulipsprings*, I hereby agree that I, my heirs, my distributees, guardians, legal representatives and assignees will not make a claim against, sue, attach the property of, or prosecute *Tulipsprings*, its landlord, directors, officers, members, employees or assignees, for any claim I now have or may hereafter have for death, injury or property damage resulting from my use of the facilities at the *Tulipsprings*, whether caused by my acts of omission or negligence or any else's. In addition, it is understood that any and all insurance that I have shall be primary.

To the fullest extent permitted by law, **I shall defend, indemnify & hold harmless** *Tulipsprings*, its landlord, directors, officers, agents and employees for and against any and all claims, damages, losses, expenses and liabilities of every kind, including but not limited to attorney's fees, in any way arising out of or in connection with my activities under this Agreement. This indemnify shall apply regardless of any active and/or passive negligent act or omission of *Tulipsprings*, its landlord, directors, officers, agents and employees.

***I have carefully read this agreement and release and fully understand its contents. I am aware that this is a Release of Liability, a waiver of legal rights and contracts between me and Tulipsprings. I sign this agreement and liability at my own free will. I further acknowledge that there are no warranties either express or implied, concerning the facilities, events or activities at Tulipsprings.***

Signature: \_\_\_\_\_  
(Must be signed by a Parent or Guardian if Member is under the age of 18)

Please Print Name: \_\_\_\_\_

Emergency Contact Name(s): \_\_\_\_\_

Emergency Contact #(s): \_\_\_\_\_

---

## **PHOTO RELEASE**

I agree that as a condition and in consideration of [acceptance of entry in this event] [and/or admission to the grounds of Tulipsprings], and/or its assigns may for commercial purposes use, publish, copyright, or assign photographs, videos, audios, cablecasts, or other likenesses of me and my horse taken while on the grounds. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to compensation, invasion of privacy, right of publicity, or misappropriation. If the person entered/admitted is under 18, I certify that I am his or her parent or legal guardian and I give my consent to the same on his or her behalf.

Signature: \_\_\_\_\_ Please Print Name: \_\_\_\_\_

(Must be signed by a Parent or Guardian if Member is under the age of 18)

***WARNING: Under Washington law, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in equine activities resulting from the inherent risks of equine activities. Revised Code of Washington 4.24.540***

[Tulipsprings@aol.com](mailto:Tulipsprings@aol.com)

Mailing Address: 412 East 36<sup>th</sup> Avenue, Kennewick, WA 99337

Cross Country Site: 31807 S. Carlson Rd, Kennewick, WA 99337

Phone: (509) 521-1100