

Name of Participant: _____

Type of Activity: [Equine Coaching Activity]

Date of Activity: _____



NORTH LIGHT COACHING

NORTH LIGHT COACHING, LLC (“NLC”)

**ACKNOWLEDGEMENT OF RISK:
WAIVER OF LIABILITY & RELEASE
PHOTO AUTHORIZATION**

In consideration of NLC’S services relating to the Activity and my desire to participate in this Activity, I agree as follows:

Although NLC has taken reasonable steps to provide you with sufficient information so you can enjoy and benefit from this Activity for which you may not be skilled, we wish to remind you this Activity is not without risk.

Certain risks cannot be eliminated without destroying the unique character of this Activity. The same elements that contribute to the unique character of this Activity can be causes of loss of or damage to your equipment, accidental injury or illness or, in extreme cases, permanent trauma or death. We do not want to frighten you or reduce your enthusiasm for this Activity, but we do think it is important for you to know in advance what to expect and to be informed of the inherent risks and dangers. The following describes some, but not all of these intrinsic dangers and risks that are an integral part of an equine activity: (i) the propensity of equines to behave in ways that may result in injury, harm, or death to persons on or around them; (ii) the unpredictability of an equine’s reaction to such things as sounds, sudden movement, and unfamiliar objects, persons, or other animals; (iii) certain hazards such as surface and subsurface conditions; (iv) collisions with other animals or objects; and (v) the potential of a participant acting in a negligent manner that may contribute to injury to the participant or others, such as failing to maintain control over the equine or not acting within the participant’s ability.

I understand that the description of these risks and dangers is not complete, and that other unknown or unanticipated risks may result in injury or death. I hereby waive my rights to sue NLC for the risks and dangers identified herein, and those risks not specifically identified. My participation (or the participation of my child for which I am the guardian) in this Activity is purely voluntary; no one is forcing me to participate, and I (or my child) elect to participate in spite of the risks.

I certify that I have been given the opportunity to ask questions about the Activity. I certify that I (or my child) am fully capable of participating in this Activity. Therefore, I assume full responsibility for myself, including my minor children, for bodily injury, death, loss of personal property, and expenses thereof as a result of those inherent risks (known or unknown) and/or my (or my child’s) negligence in participating in this Activity. I agree to indemnify and hold harmless



NLC (and its agents, employees, owners, assistants, independent contractors, co-sponsors and their affiliates) from any and all injuries, losses or liabilities incident to my involvement or participation in the Activity on this or any other day to the fullest extent permitted by law, including under Va. Code Section 3.2-6200-6203 as amended.

UNDER VIRGINIA LAW, AN EQUINE ACTIVITY SPONSOR OR AN EQUINE PROFESSIONAL HAS LIMITED LIABILITY FOR AN INJURY TO OR DEATH OF A PARTICIPANT ENGAGED IN AN EQUINE ACTIVITY RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES PURSUANT TO CODE OF VIRGINIA, TITLE 3.2, CHAPTER 62 EQUINE ACTIVITY LIABILITY ACT §3.2-6200 – 3.2-6203.

I have read, understood, and accepted the terms and conditions stated herein and acknowledge that this agreement shall be effective and binding upon myself, my heirs, assigns, personal representatives, estate, and all members of my family, including any minors accompanying me.

Name of Client/Participant (or parent or Guardian if under age 18)	Signature	Date
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Authorization to Take Photos

Participant is aware that photos may be taken of the Participant during the Activity and used for commercial promotion of North Light Coaching, LLC via its website, brochures and other similar publications and advertisements. I understand my identity will be protected to the extent possible.

I _____ authorize _____ do not authorize the taking of photos of me and/or my child.

Name of Client/Participant (or parent or Guardian if under age 18)	Signature	Date
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