



AGREEMENT FOR RELEASE AND WAIVER OF LIABILITY FOR – MINOR CHILD

I fully understand that cross-country horseback riding and foxhunting (which includes riding over fences, riding over other obstacles, and riding in and through steep, wet, and rough terrain) are very dangerous activities. Knowing they are dangerous, I wish to allow my child to participate in these activities. I accept and assume all the risks of injury (including death) to my child and/or my property. I represent and warrant that I have the authority to give this release.

In exchange for my child being permitted to participate in these activities, for my child, myself, my child’s heirs, guardians, and legal and personal representatives, I release and agree not to make or bring any claim of any kind against Lowcountry Hunt, or its masters, staff, officers, volunteers, employees, committee members, Hunt members, guests, or any landowners, landholders, or other persons making property available for Lowcountry Hunt activities (hereafter collectively referred to as “Lowcountry Hunt”), for any injury (including death), to me or my child, or any damage to its horse or to other property whether from anyone’s negligence or not, or any other cause, arising out of my child’s participation in these dangerous equine activities – including foxhunting and other related activities – and I also agree that if anyone makes any claims because of any injury to my child (including death), or for any damage to its horse or other property, I will keep all those released by this agreement free of any damages or costs because of those claims.

I am aware of the risk of exposure to COVID-19 that exists while participating in horseback riding, foxhunting, and related equestrian activities, including social gatherings. I accept and assume all risks of exposure to COVID-19 to me or my child while participating in Lowcountry Hunt equestrian or social activities. I, as the adult/guardian, also agree to keep all those released by this agreement free of any claims and all causes of action for illness, medical expenses, pain and suffering, death, or other loss or damages caused by exposure to COVID-19 during Lowcountry Hunt activities. I, as adult/guardian, understand that this release and waiver discharges Lowcountry Hunt from any liability or claim that I, the child, the child’s heirs or legal or personal representatives may have against Lowcountry Hunt with respect to bodily injury, illness, death, medical treatment, or property damage that may arise from the services and activities provided by Lowcountry Hunt.

By signing this waiver, I also agree to that the child will wear an ASTM-approved helmet when participating in equestrian activities with Lowcountry Hunt.

WARNING
UNDER SOUTH CAROLINA LAW, AN EQUINE ACTIVITY SPONSOR OR EQUINE PROFESSIONAL IS NOT LIABLE FOR ANY INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES, PURSUANT TO ARTICLE 7, CHAPTER 9 OF TITLE 47, CODE OF LAWS OF SOUTH CAROLINA, 1976.

Signature (adult or guardian)

Date

EMAIL & CELL PHONE

Printed Name (adult or guardian)

Address

Printed Name & Age (minor)

Address