** This form must be signed EVERY year by 4-H horse member and parent **

Rev. 1/23/09

4-H Member’s Name _______________________________ 4-H Club Name ______________________

PERMISSION TO PARTICIPATE IN 4-H HORSE ACTIVITIES
DISCLOSURE AND RELEASE OF CLAIMS

I, _______________________________, have chosen to participate in the Ohio 4-H Horse Program and its related horse activities. I understand that this participation will involve contact with horses and may give rise to a risk of physical injury.

I am aware that:

A. Horses have a tendency to behave in ways, which may result in injury, death, or loss to riders, or other persons in the immediate vicinity;

B. Horses may react in an unpredictable way to sounds, sudden movement, unfamiliar objects, persons, or other animals;

C. Riding a horse may give rise to a risk of injury from hazards arising from the surface or subsurface of the ground in which these riding activities occur;

D. While in the vicinity of a horse or while riding a horse, I may be involved in a collision with another horse, another animal, a person, or an object;

E. Other participants in the program may fail to maintain control over a horse or fail to act within their abilities, thus causing harm to me or other participants; and

F. Other participants in the program may act in a negligent manner, which could result in harm to me.

As parent or guardian I have discussed with my child the need to behave in a safe manner. I will make sure that my child wears appropriate clothing and footwear during horse activities.

In consideration for the opportunity to participate in club, county, district and state 4-H horse activities and the use of services and facilities made available through these 4-H horse activities, I do release and forever discharge for myself and my heirs, executors, administrators, and assigns, the Ohio 4-H Horse Program professional and volunteer leaders, extension educators, The Ohio State University and its Board of Trustees, its administrators, faculty and staff, from all claims, demands, and causes of action for personal injury or any other damage which may arise out of or be in any way related to my participation in this activity or program.

I understand that my child is not required to participate in any horse activity, but grant permission for him/her to do so, despite the possible risks. I recognize that by participating in these activities, as with any physical activity, my child may risk personal injury. I hereby attest and verify that I have been advised of the potential risks, that I have full knowledge of the risks involved in these activities, and that I assume any expense that may be incurred in the event of an accident, illness, or other incapacity, regardless of whether I have authorized such expenses. As a parent/guardian, I assume the same risk for myself, and other family members and friends present at these horse activities.

Signed: _______________________________  Date ____________________________
(Parent or Guardian)

Signed: _______________________________  Date ____________________________
(4-H Member)

Signed: _______________________________  Date ____________________________
(4-H Advisor)

This form needs to be signed and on file for each youth participant in any 4-H horse program activity. The form needs to be signed each year and before a youth participates in the Ohio 4-H Horse Program Activities.

Under Ohio law, Section 2305.40 of the Revised Code, an equine activity sponsor, professional, volunteer, participant or other person is not liable for an injury to or the death of a participant in the equine activities resulting from the inherent risks of equine activities.