Release of Liability

2024 Rockingham County Fair Horse Show

I, the undersigned, wish to participate in the Rockingham County Fair Horse Show event on the Sept 1, 2024.I understand that during portions of this event 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 Rockingham County Fair Horse Show allowing my participation in this event, I, on the 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 Rockingham County Fair, which includes its officers, directors, members, agents, volunteers, 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 Rockingham County Fair Horse Show. I shall not bring any claims, demands, legal actions or causes of action against the Rockingham County Fair for any damage or loss due to bodily injury, death or property damage arising out of my participation in this event.

WARNING

This Virginia section provides that an equine activity sponsor, an equine professional, or any other person shall not be liable for an injury to or death of a participant resulting from the intrinsic dangers of equine activities. Liability is not limited to where the equine professional intentionally injures the participant, commits an act or omission that constitutes negligence for the safety of the participant, or knowingly provides faulty equipment or tack that causes injury. The statute seems to imply that a waiver should be executed when a participant engages in equine activities to adequately insulate the equine professional.

Va. Code Ann. § 3.1-796.130 (1994)

| Signature of Participant | Date |
|---------------------------------|------|
| | |
| Signature of Parent or Guardian | Date |
| (If participant is a minor.) | |