

## PARTICIPANT AGREEMENT, RELEASE, AND ASSUMPTION OF RISK.

In consideration of the services of Wilderness Pursuit, Wilderness Pursuit West, their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "W.P."), I hereby agree to release, indemnify and discharge W.P., on behalf of myself, my children, my parents, my heirs, assigns, personal representative and estate as follows:

- 1. I acknowledge that horseback trail rides and pack trips entail known and unanticipated risks, which could result in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity. THE RISKS INCLUDE, AMONG OTHER THINGS: loss of control, collisions, horses irrespective of their previous behavior and characteristics, may act or react unpredictably based upon instinct, fright, or lack of proper control by rider, latent or apparent defects or conditions in equipment, animals or property, acts of other participants in this activity, adverse weather conditions; contact with plants or animals; my physical condition or my own acts or omissions; the condition of remote roads, trails, waterways, or terrain, and accidents connected with their use; first-aid, emergency treatment or other services rendered; consumption of food and drink.
- 2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.
- 3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless W.P. from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of W.P.'s equipment or facilities. Including any such Claims, which allege negligent acts or omissions of W.P.
- 4. Should W.P. Or anyone action on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
- 5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have. I am willing to assume—and bear the costs of—all risks that may be created, directly or indirectly, by any such condition.
- 6. In the event that I file a lawsuit against W.P., I agree to do so solely in the state of WI, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.
- 7. I agree that W.P. has the right to use any photography taken during a W.P. event that I am in for W. P. advertising purposes.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against W.P. on the basis of any claim from which I have released them herein.

I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms. New: No Cell phones on Horse Ride!

SIGNATURE OF PARTICIPANT	PRINT NAME		
Address:	City	ST	Zip
PhoneE-mail_			
DATE			
PARENT'S OR GUARDIAN'S ADDIT	FIONAL INDEMNIFICA	ATION	
	r participants under the		
In consideration of	(print minor's name) ("Minor") being permitted by		
W.P. to participate in its activities and			
indemnify and hold harmless W.P. from	m any and all Claims wh	ich are brought b	y, or on behalf of
Minor, and which are in any way conne	•		• -
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