

**Wicomico Hunt Club
Cecilton, Maryland 21913**

**AGREEMENT FOR VOLUNTARY RELEASE,
WAIVER OF LIABILITY, ASSUMPTION OF RISK
COVENANT NOT TO SUE AND INDEMNITY AGREEMENT**

I request permission to participate in foxhunting and/or any other equine related activities (including, but not limited to) hunter paces, hunting clinics, mock hunts, paper chases, cross-country trail rides, social activities (collectively referred to as "WHC activities") with the WICOMICO HUNT CLUB, Inc. subject to the Rules and Regulations thereof. In consideration of the grant of permission to participate in WHC ACTIVITIES, I, for myself, my child or children, my spouse, my personal representatives, heirs, next of kin, assigns, guardians and legal representatives, DO HEREBY:

1. **DECLARE that I (the "Releasor,") do fully understand that participation in WHC ACTIVITIES involves DANGER AND THE RISK OF INJURY OR DEATH** and that there is INHERENT DANGER IN THESE ACTIVITIES WHICH I APPRECIATE AND VOLUNTARILY ASSUME FOR MYSELF AND ANY MINOR CHILD I AM SIGNING FOR. I have observed or I am aware of the risks inherent in these activities, and I know as well that other participants pose a danger to me and my horse. Nevertheless, **I VOLUNTARILY ELECT TO ACCEPT ALL RISKS connected with participation in WHC ACTIVITIES.**
2. **RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the WICOMICO HUNT CLUB, INC., Inc.** and its Masters of Foxhounds, officers, directors, members, employees, huntsman, whippers-in, guests or any landowners, landholders or other persons making property available to the WICOMICO HUNT CLUB, Inc. (the "Releasees") from and against any and all claims, liabilities arising out of the actions or omissions of Releasees or any other participant in WHC ACTIVITIES which cause the undersigned to suffer injury, death or property damage, or loss, regardless of the legal basis for any such claim or liability. I hereby covenant and agree to hold Releasees harmless and indemnify them from and against any claim, legal action, judgment or expense (including reasonable attorney's fees) such Releasees may incur arising out of my participation, or that of my minor child in WHC ACTIVITIES.
3. **This Agreement shall remain in effect during this and all subsequent participation, from year to year hereafter, until this release is revoked in writing by the undersigned participant.**

This Agreement shall be governed by and construed in accordance with the laws of the State of Maryland, as to those activities occurring in the State of Maryland and in accordance with the laws of the State of Delaware, as to those activities occurring in the State of Delaware. I agree that this Agreement is intended to be as broad and inclusive as it is permitted by the laws of Maryland and Delaware and that if any portion hereof is held invalid, it is agreed that the balance shall continue in full legal force and effect.

FURTHER, I CERTIFY AS FOLLOWS: (i) I HAVE READ AND FULLY UNDERSTAND THIS DOCUMENT; (ii) I FULLY UNDERSTAND THAT IT IS A RELEASE OF ALL CLAIMS A COVENANT NOT TO SUE AND INDEMNITY AGREEMENT; AND (iii) I UNDERSTAND THAT I AND ANY MINOR I AM SIGNING FOR ASSUME ALL RISKS OF WHC ACTIVITIES AND THAT THIS RELEASE SHALL REMAIN IN EFFECT UNTIL REVOKED BY ME IN WRITING.

I VOLUNTARILY SIGN MY NAME, EVIDENCING MY UNDERSTANDING AND ACCEPTANCE OF THE ABOVE PROVISIONS.

X _____ Date _____
Signature (To be signed by parent or legal guardian if participant is under 18 years of age).

Please Print Name of Participant and the name of any minor participant you are signing for

Cell phone number

Email address

Emergency Contact name

EC phone number