



Adult Helmet Waiver, Assumption of Risk, and Release of Liability

I, the undersigned, recognize the inherent dangers of riding equines (horses, mules, burros). I realize that I am subject to injury from this activity and that no form of preplanning can remove all of the danger to which I am exposing myself. I am aware that the Broome Horse Riders' Club Inc requires that all minor riders must wear and strongly recommends that all adult riders should wear ATSM/SEI approved equestrian helmets at all times while mounted. I am aware that an ATSM/SEI approved equestrian helmet can prevent head injuries and/or traumatic brain injuries in the event of an accident. Despite the Broome Horse Riders' Club Inc recommendation I am refusing this critical safety precaution, and I am assuming all risk of injury to myself by my refusal to wear an equestrian helmet.

I, the undersigned, on behalf of myself, my successors, assignees, agents, and my heirs and executors, hereby release, waive, forever discharge, and covenant not to sue the Broome Horse Riders' Club Inc, and its officers, agents, employees, and volunteers (collectively "Releasees"), for any and all liability whatsoever for any and all damages, losses, or injuries (including but not limited to death) to persons or property or both, including but not limited to any and all claims, demands, actions, causes of actions, damages, losses, injuries, costs, expenses, and attorneys' fees, that may be sustained while I am attending and/or participating in any Broome Horse Riders' Club Inc activity or any activity carried on by me in connection therewith, including injuries sustained as a result of the negligence of Releasees.

I, the undersigned, hereby covenant and agree to indemnify and hold harmless Releasees for and against any and all liability whatsoever for any and all damages, losses, or injuries (including but not limited to death) to persons or property or both, including, but not limited to, any and all claims, demands, actions, causes of actions, damages, losses, injuries, costs, expenses, and attorneys' fees, that arise out of my while I am attending and/or participating in any Broome Horse Riders' Club Inc activity or any activity carried on by me in connection therewith, whether or not caused by a party indemnified hereunder, including, but not limited to, damages, losses, or injuries sustained as a result of the negligence of Releasees.

I have read, understood and accept the Adult Helmet Waiver.

Name (printed): _____

ID Type & Number: _____ Date: _____

Signature: _____

Signature Witnessed By:

Witness 1 Name: _____ Date: _____

Committee Position: _____ Signature: _____

Witness 2 Name: _____ Date: _____

Committee Position: _____ Signature: _____



Broome Horse Riders' Club

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