



# Horse Owner Agreement and Release

## Addendum to the RMDS Scholarship Application

Horse owner name(s): \_\_\_\_\_

Horse owner's address: \_\_\_\_\_

Phone 1: \_\_\_\_\_ Phone 2: \_\_\_\_\_

Email address: \_\_\_\_\_

Horse's registered name: \_\_\_\_\_

Breed/Registry: \_\_\_\_\_ Age: \_\_\_\_\_ Color: \_\_\_\_\_

I, as above-named owner(s) of above-specified horse, have agreed to allow \_\_\_\_\_  
\_\_\_\_\_ (*name of scholarship applicant*) to use my/our horse  
for the activities described in the scholarship application signed and dated on  
\_\_\_\_\_ by the applicant, or applicant's parent(s) or guardian(s),  
if applicant is a minor. I have provided the applicant with a copy of my horse's Colorado brand card  
and registration papers (if applicable).

### **LIABILITY RELEASE**

I hereby agree to fully and expressly assume and accept any and all risks of injury or death inherent in any equine activities in which my horse participates as a part of a horse-and-rider pair engaging in RMDS-approved scholarship activities. I understand that RMDS is not responsible for death, bodily injury or property damage which my horse should sustain whether engaged in any activity described within this scholarship application, or while in transit to or from an event described herein. I hereby, for myself, my child or legal ward, my heirs, administrators and assigns release and forever discharge the owners, operators, and sponsors of RMDS and their respective servants, agents, officers and all other participants of and from all claims, demands, actions and causes of action for such injuries sustained to my horse and/or other property. I will defend and hold RMDS, their officers, directors, employees, agents, insurers, and volunteers harmless against any and all damages, liabilities, losses, claims, demands, causes of action, judgments, costs, penalties, and expenses, including reasonable attorneys' fees, arising from any of my horse's acts or failures to act.

**WARNING: Under Colorado Law, an equine professional is not liable for an injury or the death of a participant in equine activities resulting from the inherent risks of equine activities, pursuant to section 13-21-119, Colorado Revised Statutes.**

I certify that the information I have provided to the RMDS Scholarship Committee is true and correct and that I have read and do understand the Liability Release and the Warning above. I agree the horse

described above will be available to the applicant for the inclusive dates of the proposed scholarship activities.

Signature of horse owner: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name of horse owner: \_\_\_\_\_

If horse owner is a minor, then I sign as the minor's parent or legal guardian.

Minor's printed name: \_\_\_\_\_

Parent/Guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian printed name: \_\_\_\_\_