

RELEASE

I, the undersigned, understand Hawaii Law (Act 249, 1994 Hawaii Legislative Session effective June 19, 1994) limits the civil liability of persons sponsoring equine events. I understand that there are inherent limited to 1) the propensity of an equine to behave in ways that may result in injury or death to persons around them, 2) the unpredictability of an equine's reaction to such things as sounds, sudden movement, and unfamiliar objects, persons or animals, 3) Hazards such as surface and surface conditions, 4) collisions with other equine's or objects, 5) the potential negligence of other participants, such as failing to maintain control over the equine, or not acting with in the participants ability. Knowing and understanding the risk of participating in an equine activity, including injury and death to my person and damage to my personnel property, I expressly choose to assume the risk. Further, on behalf on myself, my heirs, successors, representatives, and assigned, I hereby unconditionally release any and all claims and causes of actions against New Town and Country, Buddy and Katy Gibson, Kualoa Ranch, John Morgan, Lazy L Ranch, Levi Rita, Hawaii High School Rodeo Association, Oahu Keiki and Rodeo Association, , HHSRA-Oahu District, and any of it's directors, participants, employee's, agents,, representatives, and personal, for any injury, including death, and for any damage to the personal property, which I may incur as a result of my participation in this equine activity. If the undersigned is the parent, guardian, or representative, of any minor participating in this equine activity, the undersigned agrees to indemnify the above described equine activity sponsor (including the above described persons and entities) from any and all claims causes of action brought by or on behalf of said minor at any time. I also agree to abide by all rules and regulations set forth by the Hawaii High School Rodeo Association and arena owner. I have read and understand the above.

FILL OUT COMPLETELY & SIGN

Medical Waiver

I/WE THE PARENTS/GUARDIANS OF _____ give Adventist Health Castle and the physicians and medical staff permission to administer necessary emergency treatment for injuries he/she may incur while participating in the Oahu District Keiki High Division, and High School Rodeo. We understand that each contestant must be covered by medical insurance. We hereby release the Adventist Health Castle, physicians and the medical staff, and rodeo sponsors from all liability except negligence.

ADDRESS _____ PHONE _____

MEDICAL INSURANCE _____ POLICY # _____

CONTESTANTS SIGNATURE _____ BIRTH DATE _____

PARENTS/GUARDIAN NAME _____

PARENTS/GUARDIAN SIGNATURE _____