

YMCA CAMP ERDMAN
HORSEBACK RIDING WAIVER
LIABILITY WAIVER AND RELEASE AGREEMENT (Exhibit B)

WARNING: Please read this agreement carefully! By agreeing to this Liability Waiver and Release Agreement (the "Agreement"), you will waive certain legal rights in accordance with this Agreement and as provided by law.

ACKNOWLEDGEMENT OF RISKS: I understand and acknowledge on behalf of myself and/or any minor children for whom I am responsible, that certain risks are typically involved with Horseback Riding including but not limited to fatigue, collisions, falls, encounters with animals and other creatures, stings, bites, allergic reactions and resulting illness, exposure to outdoor environments, changes or unpredictable weather, equipment failure or misuse, injury due to the unpredictability or irrational behavior of horses including bucking, stumbling, kicking, biting, running, spooking, jumping, etc., and vehicular accidents in-route to/from horseback riding location; that I and/or my minor child may suffer accidents, injuries, or illnesses in remote places where there are no available medical facilities; and that no warranty of any kind, express or implied, is being made. I also realize that participation in Horseback Riding, including being transported to and from the location of the horseback riding activity, grooming, feeding, tacking, approaching, saddling and walking horses, and/or basic polo skills (collectively, "Activities") can result in personal injury, accidents and/or illness including but not limited to dehydration, disease, cuts, bruises, sprains, fractures, head injuries, paralysis, disability, dismemberment, serious physical or emotional injury and/or death, as well as damage to or loss of personal property. I acknowledge on behalf of myself and/or my minor child that I have been fully advised of the dangers inherent in participating in the above-mentioned Activities.

EXPRESS ASSUMPTION OF RISK AND RESPONSIBILITY: In consideration of being able to participate in the activities, I, for myself and any minor children for whom I am responsible, confirm that I and/or minor child are physically and mentally capable of participating in full in the Activities. I and/or my minor child participate willingly and voluntarily in the Activities and voluntarily assume all risks and full responsibility for personal injury, accidents, or illness including death, as well as damage or loss of personal property. I am aware that there is a risk of negligence by Happy Trails Hawaii, Ltd., the Young Men's Christian Association of Honolulu, and/or each of their officers, directors, agents, employees, agents, volunteers or assigns (collectively, the "Released Parties"), including the failure by the Released Parties to safeguard or protect me/us from the risks, dangers, and hazards of the Activities. I on behalf of myself and/or my minor child freely accept and fully assume all risks, dangers and hazards associated with voluntarily participating in the Activities and the possibility of loss, personal injury or death resulting therefrom.

RELEASE: In consideration of participating in the Activities, I, on behalf of myself and/or my minor child, hereby agree as follows:

- 1) To waive any and all claims, liabilities, actions, damages, penalties, suits, costs or expenses of any nature whatsoever, in law or equity (collectively, "Claims"), that I and/or my minor child has or may in the future have against the Released Parties, and to release and forever discharge the Released Parties from any and all Claims, even those arising out of their omissions or negligence, that I and/or my minor child may suffer or that my next-of-kin may suffer as a result of my participation in any of the Activities, to the extent provided by law.
- 2) To hold harmless and indemnify the Released Parties from any and all Claims relating in any way to the Activities including any property damage or personal injury to any third party resulting from my participation in the Activities.

This Liability Waiver and Release Agreement shall be effective and binding upon my heirs, next-of-kin, executors, administrators, assigns and representatives, in the event of my death or incapacity. This Agreement shall be governed by and interpreted solely in accordance with the laws of the State of Hawaii and no other jurisdiction. Any litigation involving the parties to this Agreement shall be brought solely within the State of Hawaii. 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.

By signing this Agreement, I acknowledge and represent that: (1) I have read the above waiver and release, understand it, and sign voluntarily; (2) I am over 18 years of age and am of sound mind; (3) I have no known physical or mental condition that would increase the likelihood of serious injury from such participation; and (4) in case of emergency, I consent to have myself and/or my minor child taken to and treated at the nearest available medical facility.

If the participant is a minor, the undersigned parent or legal guardian warrants and represents that this Agreement, its significance and the assumption of risk, has been explained to and understood by the minor child or ward. I hereby declare, under penalty of perjury, that I am the parent or legal guardian of the named participant.

CAMPER LAST NAME		CAMPER FIRST NAME	
EVENT NAME or DATES ATTENDING			
PRINT NAME OF PARENT/GUARDIAN:		SIGNATURE OF PARENT/GUARDIAN:	
		DATE SIGNED:	