

Cave Creek Trail Rides

ACKNOWLEDGMENT OF RISKS, and ASSUMPTION OF RISK AND RESPONSIBILITY

PLEASE READ IN ITS ENTIRETY BEFORE SIGNING

WARNING: Northside Horse Outfitters LLC dba Cave Creek Trail Rides provides many outdoor recreational activities to the public. Trip participants understand that outdoor recreational activities do involve inherent risks which are beyond the control of Cave Creek Trail Rides and their staff, agents and employees. There are significant elements of risk in any activity associated with outdoor adventures. Although we have taken responsible steps to provide you with appropriate equipment and/or skilled guides so you can enjoy an activity for which you may not be skilled, we wish to remind you this activity is not without risk. Certain risks cannot be eliminated without destroying the unique character of the activity. The same elements that contribute to the unique character can be causes of loss or damage to your equipment, or accidental injury, illness, or in extreme cases, permanent trauma or death. We do not want to frighten you or reduce your enthusiasm for this activity, but we do think it is important for you to know in advance what to expect and to be informed of the inherent risks. I understand that Cave Creek Trail Rides is not responsible for potential exposure and potential infection of airborne illness, including but not limited to Influenza and Coronavirus.

ACKNOWLEDGMENT OF RISKS: I acknowledge that the following describes some, but not all, of those risks:

1) Falling; 2) Cold weather-related injuries and illnesses including frost-nip, frostbite, hypothermia and dehydration. 3) an “act of nature” which may include avalanche, rock fall, inclement weather, severe and or varied wind, temperature or weather conditions. 4) River crossings, fording, portaging, or travel including travel to or from the activity. 5) Risk associated with crossing, climbing or down-climbing of rock, snow, and/or ice. 6) Equipment failure and/or operator error. 7) Discharge of weapons; 8) my sense of balance, physical coordination, and ability to follow instructions; 9) Attack by or encounter with insects or animals; 10) Accidents or illnesses occurring in remote places where there are no available medical facilities; 11) Fatigue, chill and/or dizziness, which may diminish my/our reaction time and increase the risk of accident.

I understand the description of these risks is not complete and that unknown or unanticipated risks may result in injury, illness or death.

EXPRESS ASSUMPTION OF RISK AND RESPONSIBILITY: I am aware that this activity entails risks of injury or death to me and minor children for which I may be responsible. I agree to assume responsibility for the risks identified herein and those risks not specifically identified. My/Our participation in this activity is purely voluntary. No one is forcing me/us to participate and I/we elect to participate in spite of all risks. I am (We are) physically and mentally capable of participating in the activity and/or safety using the equipment.

AUTHORIZATION; I hereby authorize any medical treatment deemed necessary in the event of any injury while participating in the activity. I either have appropriate insurance or, in its absence, agree to pay all costs of rescue and/or medical services as may be incurred on my/our behalf.

ACKNOWLEDGMENT; “In consideration of the services of Cave Creek Trail Rides, their officers, agents, employees, and stockholders, and all other persons or entities associated with those businesses., I certify that I am fully capable of participating in this activity. Therefore, I assume and accept full

responsibility for myself, including all minor children in my care, custody, and control, for bodily injury, death, loss of personal property, and expenses as a result of those inherent risks and dangers identified herein and those inherent risks and dangers not specifically identified and as a result of my/our negligence in participating in this activity.”

I have read the foregoing acknowledgment of risks, assumption of risk and responsibility.

DATE: _____

NAME: _____

SIGNATURE: _____

LIST MINOR CHILDREN RIDING (6-17YRS OLD): _____

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HARD-HAT ACKNOWLEDGMENT OF RISK

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I, the undersigned, recognize the dangers inherent with horseback riding. I am assuming the hazard of this risk for myself and my minor child/children since I wish to ride horses. I realize I am subject to injury from this activity and that no form of pre-planning can remove all the danger that I am exposing myself and my child/children to. I have been offered a protective riding helmet, which could reduce the risk of and/or prevent permanent or other brain damage in the event of an accident. And understanding such risk I am voluntarily declining to wear a helmet and that it is offered as a critical safety precaution

DATE: _____

NAME: _____

SIGNATURE: _____

LIST MINOR CHILDREN RIDING (13-17YRS OLD): _____