

OUTBACK RIDERS HORSE CLUB, Inc.

EMERGENCY CONTACT AND RELEASE

Date _____

Name _____ Address _____

Cell phone _____ Alternate phone _____ Email _____

In case of emergency, contact:

Name _____ Relationship _____ Address _____

Cell phone _____ Alternate phone _____ Email _____

Any allergies, medications, or other information needed in an emergency: _____

Release and Waiver of Liability

PLEASE READ CAREFULLY! THIS IS A LEGAL DOCUMENT THAT AFFECTS YOUR LEGAL RIGHTS!

This Release and Waiver of Liability (the "Release") executed on this day of _____, 20____ by _____

(the "Volunteer") in favor of Outback Riders Horse Club, Inc., a nonprofit corporation, and its directors, officers, employees, and agents.

The Volunteer desires to work as a volunteer for Outback Riders Horse Club, Inc. and engage in the activities related to being a volunteer for the improvement of and maintenance on the Outback Riders Horse Club Trail in the Machickanee Forest in Oconto County (the "activities"). The Volunteer understands that the Activities may include the use of motorized vehicles, power tools, hand tools, digging tools, and other tools necessary to maintain the tread and the overhead clearance of Outback Rider Horse Club Trail and accompanying parking lot. Initial _____

The Volunteer hereby freely, voluntarily, and without duress executes this Release under the following terms:

1. Release and Waiver. Volunteer does hereby release and forever discharge and hold harmless Outback Riders Horse Club, Inc. and its successors and assigns from any and all liability, claims, and demands of whatever kind of nature, either in law or in equity, that arise or may hereafter arise from Volunteer's Activities with Outback Riders Horse Club, Inc. Initial _____
2. Release and Waiver. Volunteer does hereby release and forever discharge and hold harmless Oconto County, its directors, supervisors, employees, agents, and its successors and assigns from any and all liability, claims, and demands of whatever kind of nature, either in law or in equity, that may hereafter arise from Volunteer's Activities with Outback Riders Horse Club, Inc. Initial _____
VOLUNTEER UNDERSTANDS THAT THIS RELEASE DISCHARGES OUTBACK RIDERS HORSE CLUB, Inc. AND/OR OCONTO COUNTY FROM ANY LIABILITY OR CLAIM THAT THE VOLUNTEER MAY HAVE AGAINST OUTBACK RIDERS HORSE CLUB, Inc. AND/OR OCONTO COUNTY WITH RESPECT TO ANY BODILY INJURY, PERSONAL INJURY, ILLNESS, DEATH, OR PROPERTY DAMAGE THAT MAY RESULT FROM VOLUNTEER'S ACTIVITIES WITH OUTBACK RIDERS HORSE CLUB, Inc., WHETHER CAUSED BY THE NEGLIGENCE OF OUTBACK RIDERS HORSE CLUB, Inc. OR IT'S OFFICERS, DIRECTORS, EMPLOYEES, OR AGENTS OR OTHERWISE. VOLUNTEER ALSO UNDERSTANDS THAT OUTBACK RIDERS HORSE CLUB, Inc. AND/OR OCONTO COUNTY OR IT'S OFFICERS, SUPERVISORS, DIRECTORS, EMPLOYEES OR AGENTS DOES NOT ASSUME ANY RESPONSIBILITY FOR OR OBLIGATION TO PROVIDE FINANCIAL ASSISTANCE OR OTHER ASSISTANCE, INCLUDING BUT NOT LIMITED TO MEDICAL, HEALTH, OR DISABILITY INSURANCE IN THE EVENT OF INJURY, ILLNESS, OR DEATH. Initial _____
3. Medical Treatment. Volunteer does hereby release and forever discharge Outback Riders Horse Club, Inc. and Oconto County from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Volunteer's Activities with Outback Riders Horse Club, Inc. Initial _____
4. Assumption of the Risk. The Volunteer understands that the Activities may involve work that may be hazardous to the Volunteer, including, but not limited to; trail brushing, tree removal, operating motorized equipment, building bridges, garbage clean up, exposure to animals (whether domestic or wild), and transportation to and from the work sites. Volunteer hereby expressly and specifically assumes the risk of injury, harm, or death in the Activities and releases Outback Riders Horse Club, Inc. and /or Oconto County from all liability for injury, illness, death, or property damage resulting from Activities. Initial _____
5. Insurance. The Volunteer understands that Outback Riders Horse Club, Inc. and/or Oconto County does not carry or maintain health, medical, or disability insurance coverage for any Volunteer. Each Volunteer is expected and encouraged to obtain his or her own medical or health insurance coverage. Initial _____
6. Volunteer's Next of Kin Release. Volunteer instructs next of kin to release and forever hold harmless Outback Riders Horse Club, Inc. and Oconto County and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or equity, that arise or may hereafter arise from Volunteers Activities with Outback Riders Horse Club, Inc. If Next of Kin pursue any court proceedings, all court costs, lawyer's fees for defense of Outback Riders Horse Club, Inc. and/or Oconto County and any assigned damages are the responsibility of the Volunteer and /or his or her estate. Initial _____
7. Other. Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Wisconsin, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Wisconsin. Volunteer also agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable Initial _____

Volunteer _____ Date _____

Witness _____ Date _____