



Release of Liability and Acknowledgement of Risk

In consideration of the use of the facilities of Greystone Farms Inc (GSF), located at 510 Maxwell Rd, Aiken, SC 29803. "its'/their" Owner/s (Sharer Dale, Maxwell Properties of Aiken, Pam & Mark Thompson) and their employees, clients, participants and all other persons or entities acting in any capacity on their behalf, hereby agree to release and discharge ALL of the above: GSF, Steeplechase, Owner/Controller of the above "facilities".

I/We expressly agree and promise to accept and assume all inherent risks existing in any equine activity. My participation in this activity is purely voluntary and I elect to participate in spite of the risks. I understand that the equine activity involves risks which could result in physical or emotional injury, paralysis, death or damage to myself, to my horse/s, to property, or to third parties. I understand that such risks cannot be eliminated without jeopardizing the essential qualities of the activity.

I voluntarily execute this written waiver by which I expressly release, forever discharge, and waive any claim or cause of action which I may have against GSF (Sharer Dale), Maxwell Properties of Aiken, Pam & Mark Thompson). I understand that by signing this waiver I do not have a claim or cause of action upon which a recovery of damages may be based and may not recover damages in a tort or other civil action against from any and all claims, demands, or causes of actions which are in any way connected with my participation in this activity or my use of the Greystone Farms Facilities or "other", including any claims which allege negligent acts or omissions of GSF, or Steeplechase/ "Owners" or Home Owners Association Members.

WARNING: Under South Carolina law, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in an equine activity resulting from an inherent risk of equine activity, pursuant to Article 7, Chapter 9 of Title 47, Code of Laws of South Carolina 1976.

(Signature)

(date)

This waiver shall be in effect until revoked by me. Date _____.

Name _____, if minor, Date of Birth _____.

Parent or Guardian must sign for minor under 18 yrs of age: _____.

Address: _____.

Phone/s: _____.

Emergency Number / Contact (relationship): _____.