

EQUINE RELATED ACTIVITY RELEASE & HOLD HARMLESS AGREEMENT

KNOW ALL MEN BY THESE PRESENTS: That _____, (hereinafter referred to as "Volunteer/ Participant/Guest"), for and in consideration of participation in any Naples Equestrian Challenge, Inc. programs and presence on any NEC property and for other good and valuable consideration in hand received by Volunteer/Participant/Guest, the receipt and adequacy of which are hereby acknowledged, does hereby RELEASE AND HOLD HARMLESS, Naples Equestrian Challenge, Inc., a Florida nonprofit corporation, and it's successors and /or assigns, agents, principals, representatives and employees, (hereinafter collectively referred to as "NEC") of and from all manner of action(s), cause(s) of action, suits, controversies, agreements, promises, damages, judgments, executions, claims and demands whatsoever, in law or in equity, which Rider/Volunteer/Participant has or may have in the future from the signing of this release until the end of such Volunteer/Participant/Guest's participation in an NEC program or presence on NEC property, and any claim past, present or future which any personal representative, successor, heir or assignee of said party hereafter can, shall or may have against NEC for, upon or by reason of any matter, cause or thing whatsoever, from the time of Volunteer/Participant/Guest participation in any NEC program or being present on any NEC property until such time as Volunteer/Participant/Guest is not participating in any NEC program or from a date forward that such Volunteer/Participant/Guest is not present on any NEC property, such release and hold harmless of NEC specifically includes, but not by way of limitation, the following:

- 1) All equine activities at the property owned by NEC located on the southwest corner of the intersection of Center Street and Goodlette Road, Naples, Collier County, Florida, including, handling, care, grooming, leading and riding of horses and such activities as defined in Section 773.01, Florida Statutes, as amended from time to time; and all activities related to being in the presence of horses or on NEC property;
- 2) Any and all rights or claims arising from, relating to, or in any way connected with the death or injury of any person participating in any equine activity sponsored by NEC or death or injury of person occurring on NEC property or claim for damage to any Volunteer/Participant/Guest's personal property brought upon any NEC property by Volunteer/Participant/Guest.
- 3) Volunteer/Participant/Guest grants NEC the right and authority to perform a background check on Volunteer/Participant/Guest in advance of Volunteer/Participant/Guest's participation in any NEC activity or presence on NEC property and NEC may make future checks on background from time to time during the Volunteer/Participant/Guest's involvement in any NEC program or presence on NEC property. Volunteer/Participant/Guest releases NEC from any claim, cause of action or damages based upon NEC's authorized background check(s).
- 4) Any and all rights or claims arising from, relating to or in any way connected with the death or injury of a Volunteer/Participant/Guest who takes transport in any NEC agent vehicle as part of a sponsored NEC program occurring outside of the NEC property.

WARNING

Under Chapter 773, Florida Statutes, an equine activity or sponsor or equine professional is not liable for any injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities. This Release further incorporates the immunity to volunteers of not-for- profit organizations who are acting within the scope of their responsibilities and who do not cause harm willfully or with wanton disregard for safety.

IN WITNESS WHEREOF, the undersigned executes this release

this _____ day of _____, 200_____.

Release & Hold Harmless Agreement Continued:

Volunteer/Participant/Guest

Printed Name: _____

Address: _____

(Street)

(Apt/Ste)

(City)

(State)

(Zip)

Signature: _____ Date: _____

Email address: _____

Home Phone #: _____ Cell #: _____

Date of Birth: _____

Emergency Contact Person: _____

Relationship of Contact Person to participant: _____

Emergency Contact Phone: _____ Cell #: _____

Witness #1 Signature: _____ Printed Name: _____

Witness #2 Signature: _____ Printed Name: _____

**Signature REQUIRED if Volunteer/Participant/Guest is:
UNDER THE AGE OF 18 or IF AN ADULT AND UNDER GUARDIANSHIP**

Parent / Guardian Printed Name: _____

Signature: _____

Parent / Guardian Phone #: _____ Cell #: _____

Witness #1 Signature: _____ Printed Name: _____

Witness #2 Signature: _____ Printed Name: _____

Naples Equestrian Challenge, Inc.
206 Ridge Drive, Naples, Florida 34108
Phone: (239) 596-2988 / Fax: (239) 514-2908
E-mail: info@naplesequestrianchallenge.org
www.naplesequestrianchallenge.org

PHOTO RELEASE FORM

For valuable consideration given and which is hereby acknowledged, the undersigned hereby grant(s) to the Naples Equestrian Challenge, Inc. permission to take or have taken, still and moving photographs and films including television pictures of _____ (print full name) and consents and authorizes Naples Equestrian Challenge, Inc., its advertising agents, news media, and any other persons interested in Naples Equestrian Challenge, Inc., its work, to the use and reproduction of the photographs, films and pictures without limit, the generality of the foregoing newspapers, television media, website, social media, brochures, pamphlets, instructional materials, books and clinical material.

With regard to the foregoing material, no inducements or promises have been made to us/me to secure our/my signature(s) to this release other than the intention on Naples Equestrian Challenge, Inc. to use or be in use or be used such photographs, films and pictures for the primary purpose of promotion and aiding its program and or its work.

Dated this _____ day of _____, 20_____.

Signature _____

Signature of parent/guardian _____

NAME RELEASE FORM

For valuable consideration given and which is hereby acknowledged, the undersigned hereby grant(s) to the Naples Equestrian Challenge, Inc. permission to use _____ 's (print full name) full name and consents and authorizes Naples Equestrian Challenge, Inc., its advertising agents, news media, and any other persons interested in Naples Equestrian Challenge, Inc., and or its work, to the use of her/his name with photographs, films and pictures without limit, the generality of the foregoing newspapers, television media, website, social media, brochures, pamphlets, instructional materials, books and clinical material.

With regard to the foregoing material, no inducements or promises have been made to us/me to secure our/my signature(s) to this release other than the intention on Naples Equestrian Challenge, Inc. to use or be in use or be used such photographs, films and pictures for the primary purpose of promotion and aiding its program and or its work.

Dated this _____ day of _____, 20_____.

Signature _____

Signature of parent/guardian _____

NEC date received: _____

Staff Initials _____

As with all not-for-profit therapeutic riding programs, NEC's success is dependent on our dedicated team of volunteers in many ways. Your participation is an invaluable asset, showing your commitment to the program's long-term stability while motivating others in our community to donate their time and effort to help our special riders succeed. PLEASE INDICATE BELOW ANY AREAS IN WHICH YOU WOULD BE INTERESTED IN HELPING OR LEARNING MORE:

I would like to help with:

_____ Therapeutic Riding and Related Program Activities

- _____ Sidewalking
- _____ Grooming/Tacking
- _____ Leading
- _____ Coordinating Riders and Volunteers during program activities

_____ Office Work

- _____ Filing
- _____ Making Phone Calls
- _____ Social Media
- _____ Data Entry
- _____ Photo Review
- _____ Newsletter
- _____ Mailing
- _____ Grant Research
- _____ Information Technology
- _____ Restocking Desk Supplies

_____ Barn Work and Repair

- _____ Tack Cleaning
- _____ Clean Empty Stalls
- _____ Resurfacing Stalls
- _____ Laundry (Washing Saddle Pads / Folding Laundry)

_____ Property Improvements/Maintenance/Repairs and Beautification

- _____ Handyman Services
- _____ Painting (Fences, House, Barn, Office Interior, etc.)
- _____ Hanging Pictures / Decorating
- _____ Gardening, Weeding and Yard Work
- _____ Specialized Contractor Services (Flooring, Electrical, Plumbing, Roofing, etc.)
- _____ Landscape Design
- _____ Architectural Design
- _____ Engineering

_____ Marketing or Fundraising

- _____ Mailings
- _____ Event Organization/Preparation
- _____ Event Set Up and Tear Down
- _____ On-site Event Assistance
- _____ Public Speaking
- _____ Auction Items
- _____ Newsletter (Design and Editing)

- _____ Photographer
- _____ Videographer
- _____ Graphic Design
- _____ Website Design
- _____ Social Media

_____ Office Cleaning

- _____ Vacuuming
- _____ Dusting
- _____ Mopping
- _____ Cleaning Bathrooms
- _____ Clean Cabinets
- _____ Office Reorganization

_____ Board or Committee Service

- _____ Board of Directors
- _____ Fundraising Committee
- _____ Program Committee
- _____ Marketing/PR Committee
- _____ Finance Committee
- _____ Risk Management Committee
- _____ Governance Committee

_____ Other _____ (please specify)

You may not realize that your special skills and talents could be of great help to our program and riders through our day-to-day operations or on a special project. Also, your affiliation (past or present) with an employer, professional association, social club or faith congregation may give us an opportunity to reach out into the community to help more people and to let others know about our work. PLEASE TELL US BELOW ABOUT ANY SPECIAL SKILLS OR AFFILIATIONS THAT YOU WOULD LIKE TO SHARE WITH US:

Current or Former Employer(s) / Professional Skills: _____

Additional Special Talents / Skills: _____

Affiliations (Professional Associations, Service Clubs, Social Clubs, Faith Congregations, Neighborhood Associations, etc.): _____
