

2025 FRANKLIN COUNTY AGRICULTURAL SOCIETY EQUINE ACTIVITIES DISCLOSURE AND RELEASE OF CLAIMS

I, _____, have chosen to participate in equine activities held on the Franklin County Fairgrounds. I understand that this participation will involve contact with horses and may give rise to a risk of physical injury.

I am aware that:

- A. Horses have a tendency to behave in ways, which may result in injury, death, or loss to riders, or other persons in the immediate vicinity;
- B. Horses may react in an unpredictable way to sounds, sudden movement, unfamiliar objects, persons or other animals;
- C. Riding a horse may give rise to risk of injury from hazards arising from the surface or subsurface of the ground on which these riding activities occur;
- D. While in the vicinity of a horse or while riding a horse, I may be involved in a collision with another horse, another animal, a person, or an object;
- E. Other participants in the program may fail to maintain control over a horse or fail to act within their abilities, thus causing harm to me or other participants; and
- F. Other participants in the program may act in a negligent manner, which could result in harm to me.

As parent or guardian, I have discussed with my child the need to behave in a safe manner. I will make sure that my child wears appropriate clothing and footwear during equine activities.

In consideration for the opportunity to participate in equine activities on the grounds of the Franklin County Agricultural Society, I do release and forever discharge myself and my heirs, executors, administrators, and assigns, The Franklin County Agricultural Society from all claims, demands, and causes of action for personal injury or any other damage which may arise out of or be in any way related to my participation in this activity on the grounds of the Franklin County Fair Agricultural Society.

I understand that my child is not required to participate in any horse activity but grant permission for him/her to do so despite the possible risks. I recognize that by participating in these activities, as with any physical activity, my child may risk personal injury. I hereby attest and verify that I have been advised of the potential risks, that I have full knowledge of the risks involved in these activities, and that I assume any expense that may be incurred in the event of an accident, illness, or other incapacity, regardless of with I have authorized such expenses. As a parent/guardian I assume that same risk for myself, and other family members and friends present at these equine events.

Signed: _____
(parent/guardian)

Date: _____

Signed: _____
(4-H Member)

Date: _____

This form needs to be signed and on file for each youth participant in any 4-H equine activity that takes place on the Franklin County Fairgrounds. The form needs to be signed each year before a youth participates in any equine activity on the Franklin County Fairgrounds. Under Ohio law Section 2305.40 of the Revised Code an equine activity sponsor, professional, volunteer, participant or other person is not liable for injury to or the death of a participant in the equine activities resulting from the inherent risk of equine activities.

DUE TO FRANKLIN COUNTY EXTENSION OFFICE BY APRIL 1, 2025