



**Cornell University**  
**Cooperative Extension**  
**Ulster County**

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**ACKNOWLEDGMENT OF RISK FORM –HORSE SHOW – YOUTH**  
(THIS FORM MUST BE COMPLETED FOR YOUTHS UNDER 18 THAT WISH TO PARTICIPATE IN THE HORSE SHOW)

I hereby apply for my child to participate in the horse show indicated below to be conducted by the designated Cornell Cooperative Extension Association and acknowledge as follows:

I fully understand and acknowledge that there are inherent risks and dangers in my child's participation in the above activities and my child's participation in said activity and use of any equipment related to such activities may result in injury, illness or death and damage to personal property. I understand other participants, accidents, forces of nature or other causes may cause these risk and dangers and I hereby accept these risk and dangers.

My child is in good health and is at or above the minimum age of \_\_\_\_\_ required to participate in this activity and is able to participate in any strenuous physical activity associate therewith.

*Cornell Cooperative Extension of Ulster County*

NAME OF HORSE SHOW: \_\_\_\_\_

LOCATION OF SHOW: \_\_\_\_\_

DATE(S): \_\_\_\_\_

I HAVE READ THE ABOVE AND BY SIGNING IT I AGREE IT IS MY INTENTION TO HAVE MY CHILD PARTICIPATE IN THE HORSE SHOW AND I UNDERSTAND AN ACCEPT THE RISKS INVOLVED.

**This shall be binding on my heirs, successors, assigns, administrators and executors. Any claims or disputes arising out of my child's participation in the activity shall be venued in the Supreme Court of the State of New York of the County where the County Extension office is located.**

**I am at least twenty-one (21) years of age and I am the legal parent/guardian authorized to sign this document on behalf of the child named herein.**

PARTICIPANT'S NAME (print) \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PARENT GUARDIAN NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

NOTE: This form must be kept in CCE Association files for 14 years if youngest participant is 8 or 18 years if participant is Cloverbud.

Cornell Cooperative Extension  
Financial Operations Resource Manual  
F.O.R.M. Code 1501 Revised August 2007

*Building Strong and Vibrant New York Communities*

Cornell Cooperative Extension in Ulster County provides equal program and employment opportunities.