



**Please read all documents before signing; all must be completed and signed prior to participation.  
Release Of Liability, Media Policy & Release, Code Of Conduct Agreement, Medical Information Form**

**HARNESS HORSE YOUTH FOUNDATION  
PARTICIPANT & PARENT RELEASE OF LIABILITY**

I, \_\_\_\_\_ (participant name) and \_\_\_\_\_ (parent/guardian name) have chosen to participate in the Harness Horse Youth Foundation program and its related horse activities. I understand that this participation will involve contact with horses and may give rise to a risk of physical injury.

In consideration of being allowed to participate in any way in the Harness Horse Youth Foundation related events and activities,

I \_\_\_\_\_ (participant name) and \_\_\_\_\_ (parent/guardian name), the undersigned, acknowledge, appreciate, and agree that:

- A. Horses have a tendency to behave in ways which may result in injury, death, or loss to drivers 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. Drivers of a horse may give rise to a risk of injury from hazards arising from the surface or subsurface of the ground/racetrack in which these driving activities occur;
- D. While in the vicinity of a horse or while driving a horse, I may be involved in a collision with another horse, another animal, a person, or an object;
- E. Other participants in the HHYF event may fail to maintain control over a horse or act within their abilities, thus causing harm to me or other participants, and
- F. Other participants in the HHYF event may act in a negligent manner, which could result in harm to me.
- G. In addition to participants being involved with and at close proximity to horses, HHYF will, as part of the program, be transporting participants to and from venues including field trips and the like.

The risk of injury from the activities and the transportation related thereto involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment and personal discipline may reduce this risk, the risk of serious injury does exist; and I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the Releasees or others, and assume full responsibility for my participation.

In consideration for the opportunity to participate in the Harness Horse Youth Foundation activities and the use of services and facilities made available through these HHYF activities, I do release and forever discharge for myself and my heirs, executors, administrators, and assigns, the Harness Horse Youth Foundation and its trustees, faculty, and staff, professionals and volunteers, and the United States Trotting Association from all claims, demands, and causes of action for personal injury and any other damage which may arise out of or be in any way related to my participation in this activity or program.

I understand that as a minor child, eighteen (18) years or younger, my parent or legal guardian is required to read and sign this form.

As a parent or guardian, I grant permission for my child to participate in any horse activity 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 responsibility for any expense that may be incurred in the event of an accident, illness, or other incapacity, regardless of whether I have authorized such expense.

I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without an inducement.

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, even if arising from the negligence of the Releasees, to the fullest extent permitted by law.

Signed: \_\_\_\_\_ participant Date: \_\_\_\_\_

Signed: \_\_\_\_\_ parent/guardian Date: \_\_\_\_\_



**HARNESS HORSE YOUTH FOUNDATION  
MEDIA POLICY & RELEASE**

The Harness Horse Youth Foundation (HHYF) routinely promotes activities through various media. This includes but is not limited to newsletters, newspapers, brochures, displays, and social media platforms. In doing so, the names and photos of participants may be included to help tell the HHYF story.

I hereby give permission for my child's name to be used in promotional material that pertains to HHYF. I also give permission for pictures to be taken and potentially used for news reporting and/or the promotion of harness racing youth activities.

Participant's Name \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_



**HARNESS HORSE YOUTH FOUNDATION  
CODE OF CONDUCT AGREEMENT**

The primary purpose of the Harness Horse Youth Foundation (HHYF) Code of Conduct is to ensure the safety and well-being of all participants at HHYF events and activities. It applies to all participants and their family members.

As a participant of HHYF, I will:

- Conduct myself in a courteous manner and treat other participants, parents, volunteers, speakers, and HHYF staff with respect. Appropriate language and behavior are expected at all times.
- Uphold an individual's right to dignity by supporting an environment of inclusion which welcomes involvement of participants from all backgrounds.
- Accept supervision and support from HHYF staff and volunteers while participating in the activities during all parts of the event.
- Follow instructions regarding safety and barn procedures.
- Obey all local, state, and federal laws.

I understand if I fail to adhere to the above Code of Conduct, I will be subject to disciplinary action and potentially prohibited from participating in HHYF events and activities.

Participant's Name \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_



**HARNESS HORSE YOUTH FOUNDATION  
MEDICAL INFORMATION FORM**

Participant's Name \_\_\_\_\_

Please list all CURRENT MEDICATIONS including dosage and frequency.

MEDICATION NAME	DOSAGE (am't in milligrams)	FREQUENCY (how many times per day)	WHEN WAS MEDICATION STARTED?

Please list all ALLERGIES to medications.

MEDICATION	WHAT HAPPENED WHEN MEDICATION WAS TAKEN

Please list all PAST and CURRENT MEDICAL PROBLEMS including allergies.

MEDICAL PROBLEM/HOSPITALIZATION	DATE

**EMERGENCY CONTACT INFORMATION**

Parent/Guardian Name \_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_

Relationship to participant \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

Participant's Doctor \_\_\_\_\_ Office Number \_\_\_\_\_

Specify special considerations such as diet, housing, or allergy precautions of the participant.

\_\_\_\_\_

\_\_\_\_\_