

Equestrian Insider Tours LLC d/b/a Wellington Insider Tours

Liability Release and Assumption of Risk Agreement

1. I, _____, hereby release and discharge EQUESTRIAN INSIDER TOURS LLC D/B/A WELLINGTON INSIDER TOURS, hereinafter referred to as 'WIT', and its agents and employees from and against any and all liability arising from my participation in the WIT Trip I have signed up for. I agree that this release will be legally binding upon myself, my heirs, successors, assigns and legal representatives; it being my intention to fully assume all risk of travel and to release WIT from any and all liabilities to the maximum permitted by law.
2. I understand activities for the Trip may include, but are not limited to, the following: travel to, from, and during the Trip; spending extended periods of time outdoors being exposed to the elements (sun, wind, rain); consumption of food and/or beverage; being around large animals; and farm tours on private property.
3. I understand that WIT acts only as an agent for the various independent suppliers that provide hotel accommodations, transportation, activities, or other services connected with this tour. Such services are subject to the terms and conditions of those suppliers. All services and accommodations are subject to the laws and regulations of the State of Florida.
4. I understand that WIT and their respective employees, agents, representatives, and assigns accept no liability whatsoever for any injury, damage, loss, accident, delay, or any other incident which may be caused by the negligence, defect, default of any company or person in performing these services.
5. I understand that WIT accepts no responsibility for losses, injury, damages or expenses of any kind due to sickness, weather, strikes, hostilities, wars, terrorist acts, acts of nature, local laws or other such causes.
6. I understand that WIT is not responsible for any baggage or personal effects of any individual participating in the tours / trips arranged by WIT. Travelers are responsible for purchasing a travel insurance policy, if desired, that will cover some of the expenses associated with the loss of luggage or personal effects.
7. I understand and agree that WIT does not provide insurance to cover medical expenses for injuries that may be sustained by me or for damage to my personal property, and that WIT strongly recommends that I carry my own health, medical, and property insurance for purposes of potential losses related to this Trip.
8. I understand that WIT reserves the right to make reasonable changes in the itinerary where deemed necessary or advisable for the comfort and well-being of trip participants.

9. I hereby consent to and authorize WIT the use and reproduction of any and all video footage or photographs taken of me during the Trip for any subsequent advertising or promotional materials without compensation. WIT is not required to submit for my approval any video footage or photographs of me or my likeness which is to be used for promotional purposes.
10. This Agreement shall be governed by and construed under the laws of the State of Florida. Notwithstanding any other agreement that I have signed related to this Trip that purports to establish the venue for any litigation arising from this trip, I agree that I will file no action against WIT or its officers, employees, and agents, whether based on this Agreement or in any way otherwise connected to this trip, in any court other than the courts of Palm Beach County, Florida.

Emergency Information:

Emergency Contact: _____ Relationship: _____

Home Telephone # _____ Cell # _____

Food Allergies: _____

Medical Allergies: _____

I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS LIABILITY RELEASE AND ASSUMPTION OF RISK AGREEMENT BY READING IT BEFORE I SIGNED IT ON BEHALF OF MYSELF AND MY HEIRS.

Participant Name (Print): _____

Participant Signature: _____

Date: _____

If Participant is under 18 years old, his/her parent or guardian must sign below.

Parent/ Guardian Name (Print): _____

Parent/ Guardian Signature: _____

Date: _____

EQUESTRIAN INSIDER TOURS LLC D/B/A WELLINGTON INSIDER TOURS is registered with the State of Florida as a Seller of Travel, Registration No. _____.