**ASSUMPTION OF RISK & AGREEMENT TO HOLD HARMLESS**

***(WARNING, AGREEMENT TO OBEY, RELEASE)***

I am aware that participating in a ***rabbit*** obedience and training project and class can be a dangerous activity involving **MANY RISKS OF INJURY**. I understand that the dangers and risks of participating in a ***rabbit*** obedience and training project and class include, but are not limited to:

*muscle sprain & injury, broken leg, arm, back, rib, head injury and*

*brain damage;* ***rabbit*** *bites and associated injury and disease; serious*

*injury or impairment to other aspects of my body, general health and*

*well-being.*

I understand that the dangers and risks of participating in a ***rabbit*** obedience and training project and class may result in not only serious injury, but in a serious impairment of my future abilities to earn a living, to engage in other business, social and recreational activities and generally to enjoy life.

I understand that I am responsible for ALL actions of my ***rabbit*** during my, and my ***rabbit’s***, participation in a cat obedience and training class, to include arrival and departure from the class, and I understand the importance of following all rules, procedures, policies and instructions as provided.

In consideration of being permitted to participate in a ***rabbit*** obedience and training class, I hereby assume all the risks associated with participation, including the actions of my ***rabbit***, and agree to hold the University of Wyoming Cooperative Extension Service, the Wyoming & Hot Springs County 4-H Program, employees, agents, representatives and volunteers harmless from any, and all, liability, actions, causes of action, debts, claims, or demands of any kind and nature whatsoever which may arise by, or in connection with, my and my ***rabbit’s*** participation in a ***rabbit*** obedience and training project and class.

The terms hereof shall service as a release and assumption of risk, for myself, my heirs, estate, executor, administrator, assignees and for all members of my family.

Name of participant (**print**):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Please complete the following if the participant is under 19 years of age:**

I/We \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ the undersigned parent(s) &/or lawful guardians(s)

of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby execute the foregoing Release and do

CONSENT for, and on behalf of, my/our minor child &/or ward.

I/WE HAVE CAREFULLY READ THE FOREGOING RELEASE AND CONSENT AND SIGN SAME AS MY/OUR OWN FREE ACT. I/WE HEREBY CERTIFY THAT I/WE ARE LAWFULLY EMPOWERED TO ENTER INTO THIS RELEASE AND DO CONSENT TO BIND \_\_\_\_\_\_\_\_\_\_\_\_\_

AND MYSELF/OURSELVES THEREBY.

**Signature:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **DATE**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **DATE**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*C:\Documents and Settings\Sharon\My Documents\My Documents\MyFiles\4HINFO\LIVSTK\Rabbit\RiskAgreement.wpd*