

**Please Read Before Signing!**

**WARNING! UNDER IOWA LAW, A DOMESTICATED ANIMAL PROFESSIONAL IS NOT LIABLE FOR DAMAGES SUFFERED BY, AN INJURY TO, OR THE DEATH OF A PARTICIPANT RESULTING FROM THE INHERENT RISKS OF DOMESTICATED ANIMAL ACTIVITIES, PURSUANT TO IOWA CODE CHAPTER 673. YOU ARE ASSUMING INHERENT RISKS OF PARTICIPATING IN THIS DOMESTICATED ANIMAL ACTIVITY.**

**Society for Creative Anachronism, Inc.**

P.O. Box 360789 Milpitas, California 95036-0789 Tel (408) 263-9305 Fax (408) 263-0641

**MINOR'S CONSENT TO PARTICIPATE AND HOLD HARMLESS AGREEMENT**

\_\_\_\_\_ (hereafter referred to as "the minor")

(Print Minor's Legal Name)

does hereby state that they wish to participate in activities sponsored by the organizations known as the Society for Creative Anachronism, Inc, a California not-for-profit corporation (hereafter "S.C.A., Inc.").

The S.C.A., Inc. has rules which govern and may restrict the activities in which the minor can participate. These rules include, but are not limited to: Corpora, the By-laws, the various kingdom laws and Rules for combat related activities.

The S.C.A., Inc. makes no representations or claims as to the condition or safety of the land, structures or surroundings, whether or not owned, leased, operated or maintained by the S.C.A., Inc.

The minor's parent(s) or guardian(s) understand that all activities are VOLUNTARY and that the minor does not have to participate. It is understood that these activities are potentially dangerous or harmful to the minor's person or property, and that by participating, the minor's parents(s) or guardians(s) voluntarily accepts and assumes the risk of injury to the minor or damage to the minor's property.

It is understood that S.C.A., Inc. does NOT provide any insurance coverage for the minor's person or property; and minor's parent(s) or guardian(s) acknowledge that they are responsible for the minor's safety and the minor's own health care needs, and for the protection of the minor's property.

In exchange for allowing the minor to participate in Equestrian Activity at \_\_\_\_\_ (Name of Event)

\_\_\_\_\_ these activities and events,

Date of Event) (Location of Event) (Owner of Site)

the minor by and through the undersigned, agrees to release from liability, agrees to indemnify, and hold harmless the S.C.A., Inc., any S.C.A., Inc. agent, officer or S.C.A., Inc. employee acting within the scope of their duties, for any injury to the minor's person or damage to the minor's property.

This Release shall be binding upon the minor, the parent(s) or guardian(s), any successors in interest, and/or any person(s) suing on the minor's behalf. The minor's parent(s) or guardian(s) understand that this document is complete unto itself and that any oral promises or representations made to them concerning this document and/or its terms are not binding upon the S.C.A., Inc., its officers, agents and/or employees.

**PARENT OR LEGAL GUARDIAN MUST SIGN BELOW:**

I, the undersigned, state that I am the legal parent or legal guardian of the minor whose name appears above. I understand that the above terms and conditions apply to said minor and to myself. I further understand that said minor cannot participate under ANY circumstances in armored martial arts, and combat-related activities, equestrian activity, target archery, thrown weapons, fencing or boffers without parental consent where such participation is allowed by kingdom law. The minor will not be able to participate in any S.C.A., Inc. activities without entering into this agreement. This document is binding on myself, the said minor and any person suing on behalf of said minor. By signing I affirm that I have explained to the named minor all the inherent risk associated with with this equine activity, and that said minor acknowledges their understanding.

Minor's Name (PRINT) \_\_\_\_\_

Birth date of Minor: \_\_\_\_\_ Home State of Minor \_\_\_\_\_

Legal Name (PRINT) \_\_\_\_\_

Parent/Guardian

Legal Name (SIGN) \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian

Revised for SCA equestrian 07/02-Iowa Appropriate Waiver