

Read this agreement ca	waiver of liability, assurefully before signing it. Your signantly your child are giving up certain leg	ture indicates you understand it ar	nd agree on its terms. By signing
	ty damages, for any reason, includi		
[Name]		[Child's Name]	[Address]
	g me (or my minor child) to handle and r -of-kin, spouses and assigns, I HEREBY:	ride an equine and on behalf of myself,	my child or our personal
bite, kick, run, make unpred	neans a horse, pony, mule, donkey or as dictable movements, spook, jump obstac ch may cause the rider to fall or be jolted	cles, step on a person's feet, push or sho	
death, because of the unpr	pack riding is an inherently dangerous ac edictable nature and irrational behavior ne" when around and on the Equine.		
·	isk and danger of injury or death inheren er referred to as the Stable.	t in the use of the equine, equipment a	and gear provided to me by The Alia
officers, employees, and ag	romise not to sue the Stable, doing busing the stable, doing busing the stable, doing busing the stable, doing busing death) to my person or property.	·	-
including but not limited to leading and supervising ride loss, liability, damage or co	om any claim that such Releasees are or training or selecting equine, maintenancers. Indemnify, and save and hold harmle st they may incur arising out of or in any acts of wranglers or other employees or	ce, care, fit or adjustment of saddles or ess the Stable, instructors, its employee way connected with either my use of the	bridles, instruction or riding skills or es, and agents from and against any
<del>-</del>	ocument is a contract and agree that if a lamage in breach of this contract, the Un	<del>-</del>	
	pregnant and that I have no history of ep I be affected by horseback riding.	ileptic seizures, heart condition, previo	us back or hip injuries, or any other
8. State that I am not under the influence of alcohol or drugs that would impair my safety, the safety of the other riders, wranglers, or equine. I understand I take full responsibility in the event I am impaired to any degree.			
9. It is recommended that my child and all riders wear protective helmet. It is my understanding that a Protective Helmet is available by the stable and has been offered for my own or my child's safety. Or choose to bring your own.			
10. If the person who is to enter into this Agreement is less than eighteen (18) years of age, his/her parent or guardian must read this Agreement and sign below on the behalf adult and of the minor.			
taking control of an Equ I am aware of the inher and/or child's own safe negligent or commits w employees, and agents to the Stable allowing n	elease of Liability and FULLY UNDEr ine (Equine means horse, pony, mu ent risks associated with equine act ty and welfare and releases the Sta illful, wanton or intentional acts. Th for all claims. I have made a free an ne or my child to ride or handle an e worth the pleasure of horseback ri	tle, donkey or ass) from the Stable ivities, is willing and able to accep ble or agent from liability unless Shis is a promise not to sue and to red deliberate choice to sign this Recequine. I have concluded that the receptions	or agent and acknowledge that of full responsibility for myself table or agent is grossly elease the stable, its owners, lease and Waiver as a condition

[Date]

[Phone number]

[Name]

[Signature]