## THIS DOCUMENT WILL AFFECT YOUR LEGAL RIGHTS AND LIABILITIES

## PLEASE READ CAREFULLY

## AGREEMENT FOR ACCEPTANCE OF RISK AND WAIVER OF LIABILITY FOR ADULT AND/OR A MINOR CHILD

I REQUEST PERMISSION FOR MYSELF AND/OR MY CHILD TO PARTICIPATE IN HORSEBACK RIDING AND OTHER EQUESTRIAN RELATED ACTIVITIES ORGANIZED AND OPERATED BY <u>DREAMWEAVER RANCH</u>.

I FULLY UNDERSTAND THAT HORSEBACK RIDING, HANDLING, AND GROOMING OF HORSES AND OTHER RIDING STABLE ACTIVITIES ARE VERY DANGEROUS. I WISH TO PARTICIPATE AND/OR ALLOW MY CHILD TO PARTICIPATE IN THESE ACTIVITIES KNOWING THAT THEY ARE DANGEROUS.

I ACCEPT AND ASSUME ALL RISK OF INJURY (INCLUDING DEATH) TO ME, MY CHILD AND/OR MY PROPERTY. I REPRESENT AND WARRANT THAT I HAVE AUTHORITY TO GIVE THIS RELEASE.

IN EXCHANGE FOR MYSELF AND/OR MY CHILD BEING PERMITTED TO PARTICIPATE IN THESE ACTIVITIES, FOR MY CHILD, MYSELF, MY CHILD'S HEIRS, GUARDIANS, AND LEGAL REPRESENTATIVES, I RELEASE AND AGREE NOT TO MAKE ANY CLAIMS OF ANY KIND AGAINST <u>DREAMWEAVER RANCH</u> OR OFFICIALS, SERVANTS, EMPLOYEES, REPRESENTATIVES, OFFICERS, AND DIRECTORS FOR ANY INJURY (INCLUDING DEATH), TO MYSELF AND/OR MY CHILD OR ANY DAMAGE TO MY PROPERTY, ARISING OUT OF MYSELF AND/OR MY CHILD'S PARTICIPATION IN THESE DANGEROUS HORSEBACK RIDING OR RELATED ACTIVITIES.

IT IS MANDATORY THAT ALL RIDERS WEAR A HIGH IMPACT HELMET, AND FOOTWEAR APPROPRIATE FOR RIDING.

I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND AND AGREE TO THE TERMS AND CONDITIONS STATED HEREIN AND THAT IT IS BINDING UPON MY EXECUTORS, HEIRS AND ASSIGNS AND MY CHILDS EXECUTORS, HEIRS, AND ASSIGNS.

DATED:	
SIGNATURE OF PARENT/GUARDIAN:	
PRINT NAME:	CHILD'S NAME:
SIGNATURE OF CHILD:	
WITNESS:	