

# **RIDING INSTRUCTION AGREEMENT AND LIABILITY RELEASE**

By this agreement, made and entered this date \_\_\_\_\_ 200\_\_ by and between (rider) \_\_\_\_\_ (Parent or Guardian's name here if rider is a minor): \_\_\_\_\_

hereinafter referred to as "I" and **Carrie Orcutt and Jill Andrews, or any assistant trainers of "Los Lagos Equestrian, Inc." at 6525 Boulder Road in Granite Bay, CA,** hereinafter referred to as "**THIS STABLE**".

## **IT IS HEREBY AGREED TO AS FOLLOWS:**

1. That I, the undersigned, do for myself or on behalf of my child or legal ward, hereby voluntarily request to participate in riding instruction as a student at THIS STABLE, and that student will either ride his or her own horse, or school horses provided by THIS STABLE for instructional purpose.

2. That in the last two years student has ridden horses (write student's name or names beside appropriate riding time):

- A. Less than 10 hours \_\_\_\_ Student's name \_\_\_\_\_
- B. 10 to 20 hours \_\_\_\_\_ Student's name \_\_\_\_\_
- C. 20 hours or more \_\_\_\_ Student's name \_\_\_\_\_

3. That parent or guardian and student understand that horses are unpredictable by nature; that when frightened or angry or under stress, a horse's natural instincts are to jump forward or sideways, to run away from danger at a trot or gallop, to kick, to buck, to rear up in front, or to bite; that horses are extremely powerful; and that if a rider falls to the ground, the fall distance will be generally from 3-1/2 to 5-1/2 feet. I understand these risks, and I voluntarily assume these risks and dangers.

4. That parent or guardian and student understands that upon mounting the horse and taking up the reins the student is in primary control of the horse and that THIS STABLE is not responsible for the results of the students actions or inactions. The student further agrees to not abuse, misuse or deliberately agitate the horse as these actions may result in increased risk to himself and others.

5. That I have been advised that students should purchase and wear a helmet or hard hat and to wear it in and around THIS STABLE so as to prevent horse related injuries.

6. **LIABILITY RELEASE:** That I understand that I am responsible for bodily injury or property damage which I or my child or legal ward should sustain on THIS STABLE's premises and/or while riding a horse, and/or while in transit to or at horse shows, trail rides, or similar expeditions, and for any time I or my child or legal ward shall lose from employment or school or other activity, and for medical expenses or any other expenses incurred because of such bodily injury or property damage; and that I hereby, for myself, my heirs administrators and assigns release and discharge the owners, operators, and sponsors of THIS STABLE and their respective servants, agents, officers, and all other participants of and from all claims, demands, actions and causes of action for such injuries sustained to my person, or that of my child or legal charge and/or property.

7. That the student is currently covered by accident-medical insurance and will remain insured for the duration of all riding instruction at "THIS STABLE."

8. That this agreement is entered into in the state of California and will be interpreted and enforced under the laws of this state.

9. Upon the signing of this agreement, student acknowledges that he/she has read and agrees to be bound to THIS STABLE's rules .

I, THE UNDERSIGNED, BEING OF LEGAL AGE AND OF SOUND MIND AND NOT BEING UNDER THE INFLUENCE OF ALCOHOL, DRUGS, OR INTOXICANTS, HAVE READ AND UNDERSTAND THE FOREGOING AGREEMENT AND RELEASE.

Riding Goals: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Listed below are the details of any allergies, ailments or handicaps a student may have, and of which THIS STABLE should be aware of.

\_\_\_\_\_

\_\_\_\_\_

How did you hear about Los Lagos? \_\_\_\_\_

\_\_\_\_\_

SIGNATURE OF RIDER \_\_\_\_\_ DATE \_\_\_\_\_ 200\_\_  
(if of legal age and not under guardianship)

PARENT OR GUARDIAN \_\_\_\_\_ DATE \_\_\_\_\_ 200\_\_

FULL ADDRESS \_\_\_\_\_

\_\_\_\_\_

HOME PHONE \_\_\_\_\_ BUSINESS PHONE \_\_\_\_\_

CELL PHONE \_\_\_\_\_

EMERGENCY NUMBER \_\_\_\_\_