



EQUESTRIAN ARTS FOUNDATION
1862 E. Lower Springboro Rd., Waynesville, OH 45068

Maria Lee: Exec. Director
(937)554-4116
(937)558-5778
info@equestrianarts.org

REGISTRATION AND RELEASE FORM
Equine Assisted Growth and Development Activity

REGISTRATION:

Client/Participant: _____ Date of Birth: _____ Age: _____
 Street: _____
 City: _____ Zip Code: _____
 Home #: _____ Work #: _____ Emergency: _____
 Employer: _____ Position: _____
 Medical Conditions: _____

CONSENT AND WAIVER OF LIABILITY:

I hereby request that the participant named above be accepted into the equine-assisted growth and development program, operated by Maria Lee, Horse Specialist. I acknowledge that Maria Lee has fully explained to me the scope of the equine- assisted growth and development program, including the potential for injury which can occur from riding horses, caring for horses or being involved in therapeutic/learning activities that include horses. Because of the potential benefits of the equine-assisted program, I hereby waive any claim which I or the client may have against Maria Lee, her employees or contract personnel arising out of any injury which the client may sustain while involved in the equine program, unless caused by the willful misconduct or gross negligence of Maria Lee, her employees or contract personnel.

The undersigned assumes the unavoidable risks inherent in all horse-related activities, including but not limited to bodily injury and physical harm to horse, rider and spectator. In consideration, therefore, for the privilege of riding and/or working and/or participating in activities around horses at Sky View Stables located at 1862 E. Lower Springboro Rd., Waynesville, OH, the undersigned does hereby agree to hold harmless and indemnify the Equestrian Arts Foundation, Sky View Stables, Maria Lee, their employees or contract personnel and further release them from any liability or responsibility for accident, damage, injury or illness to the Undersigned or to any horse owned by the Undersigned or to any family member or spectator accompanying the Undersigned on the premises.

I have read and understand this release.

Signature of Client/Participant

Date

Signature of Parent/Guardian

Date

“Horses and humans helping each other through love, communication and leadership.”