

OASIS EQUESTRIAN CENTER GENERAL RELEASE

I, \_\_\_\_\_, the undersigned desire to participate in activities at the Oasis Equestrian Center, including but not limited to riding, receiving instruction, working with horses, the use of horses and equipment, and the opportunity to attend social events at Oasis Equestrian Center. In consideration of the Oasis Equestrian Center granting the undersigned the privilege of participating in activities at Oasis Equestrian Center the undersigned, hereby waives, releases and fully discharges all claims, demands, obligations and liabilities of any nature whatsoever, including negligence, for damages or loss of use, direct or indirect to my person and property which may be caused by any act or failure to act of Oasis Equestrian Center, its officers, coaches, members, employees, landlords or tenants, servants, agents, successors and assigns.

This general release covers and includes without limitation, all known, unknown, unforeseen, unanticipated or unsuspected claims of injuries, damages, and loss and any consequences thereof. This general release specifically includes, without limitation, claims based on negligence of the released parties.

I acknowledge the inherent risk and danger involved in riding horses and being around horses, including but not limited to head and facial injuries despite the use or even because of the use of a helmet and face guard. \_\_\_\_\_

I further understand and am well aware of the fact that any and all participation in activities related to the riding or care of horses is inherently dangerous, involves a high degree of risk and may result in serious injury, impairment of bodily function or death. \_\_\_\_\_

The undersigned expressly assumes all risks related to such participation whether such risks are known, unknown or could have been anticipated by the undersigned. \_\_\_\_\_

The undersigned expressly assumes the risk of all dangerous conditions concerning the operation and/or use of the premises of Oasis Equestrian Center and waives all specific notice of the existence of such conditions. \_\_\_\_\_

The undersigned hereby further agrees to indemnify and save harmless Oasis Equestrian Center, Todd Brown and employees against liability, damages or loss or expense, including attorney fees, arising from any bodily injury, including death at any time sustained by the undersigned or his or her relatives, children, subcontractors, guests, permittees, agents, servants, and/or employees arising out of:

The operation or use of the premises of Oasis Equestrian Center, any equipment, horses, or other property supplied to the undersigned or made available to the undersigned or to the undersigned's relatives, children, subcontractors, guests, permittees, agents, servants, or employees; or in participation in activities at Oasis Equestrian Center.

I hereby declare that I have completely read and fully understand this release, and I voluntarily accept its terms. My parent or guardian (if under 18) has also completely read and fully understands this release, and voluntarily accepts its terms on my behalf.

**I further certify that I have my own accidental and medical insurance coverage.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please Print Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip code \_\_\_\_\_

Birth date \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

**Emergency Information**

Parent/Guardian \_\_\_\_\_ Parent/Guardian Phone \_\_\_\_\_

Family Physician \_\_\_\_\_ Physician's Phone \_\_\_\_\_

Emergency Name if Parent/Guardian are not available Phone \_\_\_\_\_