Hideaway Hills Farm Liability Release Form FOR INDIVIDUALS

This form must be completed by and for each participant

Hideaway Hills Farm

Hereinafter known as "THIS STABLE"

LOCATION JONESTOWN, PA 17038

PLEASE READ CAREFULLY BEFORE SIGNING

SERIOUS INJURY MAY RESULT FROM YOUR PARTICIPATION IN THIS ACTIVITY.

THIS STABLE DOES NOT GUARANTEE YOUR SAFTEY.

A. <u>REGISTRATION OF RIDERS AND AGREEMENT PURPOSE</u> - In consideration of the payment of a fee and the signing of this agreement, I, the following listed individual, and the parent or legal guardians thereof if a minor, do hereby agree to hire from THIS STABLE a horse, tack and equipment, personnel and trail for the purpose of horseback riding today and on all future dates:

Weight

Over 240 ?

Horse Riding Experience (check one which applies)

Age

(if under 21)

Rider Name

(please print)

	YES NO SEGINNER (under 10 hours) OVER 10 HOURS					
	Does this rider have physical and/or mental health conditions, and/or disabilities which may affect his/her safety and ability to ride a horse? Yes No (check one)					
	If "YES", describe here:					
	TE INITIALS BELOW AFTER READING EACH SECTION. ENTS or GUARDIANS MUST ALSO INITIAL.					
B.	AGREEMENT SCOPE AND TERRITORY AND DEFINITIONS - This agreement shall be legally binding upon me the registered rider, and the parent or legal guardians thereof if a minor, my heirs, estate, assigns, including all minor children, and personal representatives; and if shall be					
	interpreted according to the laws of the state and country of THIS STABLE'S physical location. Any dispute by the rider shall be litigated in and venue shall be the county in which THIS STABLE is physically located. If any clause, phrase or word is in conflict with state law, then that					
	single part is null and void. The term "HORSE" herein shall refer to all equine species. The term "HORSEBACK RIDING" herein shall refer to riding or otherwise handling of horses, ponies, mules or donkeys, whether form the ground or mounted. The term "RIDER" shall herein refer to a person who rides a horse mounted or otherwise handles or comes near a horse from the ground. The terms "I", "ME", "MY" shall herein refer to the above registered rider and the parent or legal guardians thereof if a minor.					
C.	ACTIVITY RISK CLASSIFICATION - I UNDERSTAND THAT; Horseback riding is classified as RUGGED ADVENTURE RECREATIONAL SPORT ACTIVITY, and that there are numerous obvious and non-obvious inherent risks always present in such activity despite all safety precautions. According to NEISS (National Electronic Injury Surveillance systems of United States Consumer Products) horse activities rank 64th among the activities of people relative to injuries that result in a stay at U.S. hospitals. Related injuries can be severe requiring more hospital days and resulting in more lasting residual effects than injuries in other activities. I/WE further understand that the applicant may be participating in a "WILDERNESS EXPERIENCE" and that the meaning of this term is defined as follows: THE PURSUIT OF ADVENTURE TYPE ACTIVITY IN A WILD, RUGGED, AND UNCULTIVATED AREA OR REGION, AS OF A FOREST and/or HILLS and/or MOUNTIANS and/or PLAINS and/or WETLANDS WHICH WOULD NOT LIKELY BE UNINHABITED BY PEOPLE AND INHABATED BY WILD ANIMALS OF MANY TYPES AND SPECIES TO INCLUDE BUT NOT LIMITED TO, MAMMALS. REPTILES, AND INSECTS, WHICH ARE NOT TAME, MAY BE SAVAGE AND UNPREDICTABLE IN NATURE AND ALSO WANDERING AT THEIR WILL.					
D.	NATURE OF STABLE HORSES -I UNDERSTAND THAT: THIS STABLE chooses its rental horses for their calm dispositions and sound basic training as is required for use as riding horses for novice and beginning riders, and THIS STABLE follows a rigid risk reduction program. Yet, no horse is a completely safe horse. Horses are 5 to 15 times larger, 20 to 40 times more powerful, and 3 to 4 times faster than a human. If a rider falls from horse to ground it will generally be at a distance of from 3 1/2 to 5 1/2 feet, and the impact may result in injury to the rider. Horseback riding is the only sport where one much smaller, weaker predator animal (human) tries to impose its will on another much larger, stronger prey animal with a mind of its own (horse) and each has limited understanding of the other. If a horse if frightened or provoked it may divert from its training and act according to it natural survival instincts which may include, but are not limited to: Stopping short; Changing directions or speed at will; Shifting its weight; Bucking. Rearing, Kicking, Biting, or Running from danger.					
E.	RIDER RESPONSIBILITY - I UNDERSTAND THAT: Upon mounting a horse and taking up the reins the rider is in primary control of the horse. The rider's safety largely depends upon his/her ability to carry out simple instruction, and his/her ability to remain balanced aboard the moving animal. I agree that the rider shall be responsible for his/her safety and that of an unborn child if the rider is pregnant. THIS STABLE advises pregnant women not to ride horses, unless permission is given under advice of their physician.					

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WRITE INITIALS BELOW AFTER READING EACH SECTION. PARENTS or GUARDIANS MUST ALSO INITIAL.

F.	CONDITION OF NATURE -I UNDERSTAND THAT THIS S					
	nature that can scare a horse, cause it to fall, or react in some other unsafe way. SOME EXAMPLES ARE: Thunder, lightning, rain, wind, water, wild and domestic animals, insects, reptiles, which may walk, run, or fly near, or bite or sting a horse or person; and irregular footing on out-of-door groomed or wild land which is subject to constant change in condition according to weather, temperature, and natural and man-					
	made changes in landscape.	in onango	in condition according to weather, term	portation, and material and man		
G.	CARRY-ON OBJECT AND SHARP NOISES -I UNDERSTA	AND THAT	: Riders must not carry loose items on	rides which may fall, blow away,		
	flap in the wind, bounce, or make sharp noises, possibly so under chin, toys, and purses. Riders must not make sharp,					
Н.	SADDLE GIRTHS-NATURAL LOOSENING -I UNDERSTAND THAT: Saddle girths (saddle fasteners around horse's belly) may loosen during a ride. If a rider notices this he/ she must alert the nearest guide or wrangler as quickly as possible so action can be taken to avoid slippage of saddle and potential fall from the animal.					
I.	ACCIDENT/MEDICAL INSURANCE -I AGREE THAT: Should emergency medical treatment be required, I and/or my accident/medical insurance company shall pay for ALL such incurred expenses. My accident/medical insurance company is and my policy number is					
J.	PROTECTIVE HEADGEAR OFFERING: I, for myself and on behalf of my child and/or legal ward, have been offered a SEI CERTIFIED ASTM STANDARD F 1163 Equestrian Helmet by THIS STABLE and do understand that the wearing of such headgear while mounting, riding,					
	dismounting and otherwise being around horses, may prevent or reduce severity of some of the wearer's head injuries and possibly prevent the wearer's death from happening as the result of a fall and other occurrences. It is understood that STABLE-PROVIDED protective headgear may not be of perfect fit for each rider's head, and that once provided I/WE will be responsible for securing the helmet on this rider's head at all times. Mark an "X" below in the box before the statement which describes your choice to wear, or not to wear, STABLE-PROVIDED protective headgear.					
	() PROTECTIVE HEADGEAR ACCEPTANCE: I/WE request to wear protective headgear which this STABLE provides. () PROTECTIVE HEADGEAR I WILL PROVIDE: I/WE accept full responsibility for M Y/OUR safety in this decision.					
К.	herein, I, the rider, for myself and on behalf of my child and/or legal ward, heirs, administrators, personal representatives or assigns, do agree to hold harmless, release, and discharge THIS STABLE, its owners, agents, employees, officers, directors, representatives, assigns, members, owners of premises and trails, affiliated organizations, insurers and others acting on its behalf (hereinafter, collectively referred to as "ASSOCIATES"), of and from all claims, demands, causes of action and legal liability, whether the same be know or unknown, anticipated or unanticipated, due to THIS STABLE'S and/or ITS ASSOCIATES ordinary negligence and I do further agree that except in the event of THIS STABLE'S gross and willful negligence, I shall bring now claims, demands, actions and causes of action, and/or litigation, against THIS STABLE AND ITS ASSOCIATES as stated above in this clause, for any economic and non-economic losses due to bodily injury, death, property damage, sustained by me and/or my minor child and/or legal ward in relation to the premise and operation of THIS STABLE, to include while riding, handling, or otherwise being near horses owned by or in the care, custody and control of THIS STABLE,, whether on or off the premises of THIS STABLE.					
A	LL RIDERS AND PARENTS/ LEGAL GUARDIANS OR SPO	JUSES IVI	JST SIGN BELOW AFTER READING	THE ENTIRE DOCUMENT.		
ASSU	SIGNER STA THE UNDERSIGNED, HAVE READ AND DO UNDERSTAN MPTION OF RISK. I / WE FURTHER ATTEST THAT ALL FA AGE ARE TRUE AND ACCURATE.	ID THE FO				
			DATE			
SIGNAT	URE OF RIDER (spouses must sign for themselves)	_				
CICNAT	URE OF PARENT, GUARDIAN-and/or SPOUSE #1	_ FOR _	NAME OF RIDER (please print)	DATE:		
SIGNAT	URE OF PARENT, GUARDIAN-and/or SPOUSE #1					
SIGNAT	URE OF PARENT, GUARDIAN-and/or SPOUSE #2	_ FOR _	NAME OF RIDER (please print)	DAIE:		
Address	in full:		Home Phone #			
			Work Phone #			