



CHURCHILL CHIMES EQUESTRIAN CENTRE LTD

## Agreement for Release and Waiver Liability for an Adult

I \_\_\_\_\_ request permission to participate in horseback riding and other stable activities at Churchill Chimes Equestrian Center LTD.

I fully understand that horseback riding, handling, grooming of horses and other stables activities is a risk and can be dangerous. I wish to participate in these activities knowing that they are a risk and can be dangerous.

I accept and assume all the risks of injury (including but not limited to death) to myself or my property. I represent and warrant that I have authority to give this release.

In exchange for being permitted to participate in these activities, I release and agree not to make or bring any claim of any kind against Churchill Chimes Equestrian Centre, Owner - Barb Malcolm, her employees and/or staff, for any injury (including death), to myself or any damage to my property, whether from anyone's negligence or not, or any other cause, arising out of my participation in these dangerous horseback riding or related activities; and I also agree that if anyone makes claims because of any injury to me (including death), or for any damage to my property, I will keep all those released by this agreement free of any damages or costs because of those claims.

Print Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Emergency Contact Number: \_\_\_\_\_

Relevant Health Information (optional) \_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

Dated: \_\_\_\_\_