



Mission Ridge Stables
54410 Range Road 255, Sturgeon County, AB T8T 0T9
Tel: 780-953-2251 or 780-660-2792
missionridgestables@gmail.com
www.missionridgestables.com

Volunteer Registration

Name: _____ Date of Birth: _____

Name of Parent/Guardian(s) if applicable: _____

Address: _____

City: _____ Postal Code: _____

Phone (Home): _____ Phone (Mobile): _____

Email: _____

About you:

1. Have you ever worked with individuals with special needs, or small children?
2. Do you have any horse experience?
3. How did you hear about us?
4. When are you available to help?

LIABILITY RELEASE

As a volunteer with Mission Ridge Stables, I acknowledge the risk and potential for risk of a horseback-riding program. However, I feel that the possible benefits to the clients that I work with and to myself are greater than the risk assumed. I hereby, intending to be legally bound, for myself, my heirs and assigns, executors or administrators, waive and release forever all claims and damages against Mission Ridge Stables, its Board of Directors, Instructors, Therapists, Volunteers, and/or Employees and the property of 54410 Range Road 255, Sturgeon County, AB for any injuries and/or losses I may sustain while participating at Mission Ridge Stables.

Date: _____ Signature: _____

Date: _____ Signature: _____
(Parent/Guardian if under age of 18)

PHOTO RELEASE

I consent to authorize the use and reproduction by Mission Ridge Stables of any and all photographs, and any other audiovisual materials taken of me for promotional material, educational activities exhibitions, or for any other benefit of the program.

PRINTED NAME: _____

Signature: _____ Date: _____

Signature: _____ Date: _____
(Parent/Guardian if under age of 18)

STANDARDS OF CONFIDENTIALITY

I, _____, recognize that my role as a volunteer with Mission Ridge Stables will entitle me to certain information about the riders which should be treated as confidential. All information given to me by a parent/instructor/rider in relation to a rider will be discussed only with the personnel of Mission Ridge Stables. At no time will I discuss any information about the riders with other parents or any other individuals. I recognize that the materials and papers pertaining to the rider's care are legal documents and that all information contained therein is confidential.

PRINTED NAME: _____

Signature: _____ Date: _____

Signature: _____ Date: _____
(Parent/Guardian if under age of 18)

EMERGENCY CONTACT:

Name: _____ Relation: _____

Phone: (C) _____ (H) _____

In case of emergency, I give permission to Mission Ridge Stables to secure medical treatment including X-Ray, hospitalization, and medication

PRINTED NAME: _____

Signature: _____ Date: _____

Signature: _____ Date: _____
(Parent/Guardian if under age of 18)

Waiver Form for Mission Ridge Stables
RELEASE, WAIVER OF CLAIM, AND ASSUMPTION OF RISK WARNING
PLEASE READ CAREFULLY

The undersigned acknowledges that activities undertaken at the facility and lands of Mission Ridge Stables have inherent risks. Mission Ridge Stables will endeavor to provide reasonable services and to act reasonably, although Mission Ridge Stables is not able to assure you that the services they, or anyone else at Mission Ridge Stables facility or associated lands provides or the horses and animals at Mission Ridge Stables will meet your needs or provide a trouble free or risk free experience.

The undersigned releases Mission Ridge Stables, its directors, agents and employees from all liability and waives, as against Mission Ridge Stables its directors, agents and employees all recourse, causes of action or claims of any kind for loss or damages, including any consequential loss or damage, arising from the presence or activities of the undersigned, or anyone for whom the undersigned is a guardian or caregiver at Mission Ridge Stables or any associated lands, and voluntarily accepts the legal risk associated with the presence or activities of the undersigned or anyone for whom the undersigned or a guardian or caregiver at Mission Ridge Stables facility or associated lands, thereby expressly giving up any right of action from the physical risk arising from any actions initiated by the undersigned or, by anyone who is not affiliated with Mission Ridge Stables who is acting on the undersigned's behalf.

The undersigned further acknowledges and agrees that:

- Equestrian activities can be very dangerous and expose all participants or observers to many risks and hazards, some of which are inherent in the very nature of the sport.
- As a result of the aforementioned risks and hazards, I may suffer personal injury, property loss or even death as a result of my presence and actions of the facility of Mission Ridge Stables and any activities I engage in with Mission Ridge Stables, or in or around Mission Ridge Stables facility.
- Some of the risks and hazards are foreseeable, but many others are not.

I nevertheless, freely and voluntarily assume all possible risks, and hazards and acknowledge that my use of or attendance at the facilities at Mission Ridge Stables or its associated lands, while participating in or observing any activities, shall be entirely at my own risk, or at the risk of those for whom I am a guardian or caregiver. I understand that Mission Ridge Stables, its directors, agents and employees do not assume any responsibility or liability whatsoever for my actions while I am observing or engaged in any of the activities or using any of the facilities in any way.

By signing the Release, Waiver of Claim and Assumption of Risk Warning, I will be FOREVER PRECLUDED FROM SUING OR OTHERWISE CLAIMING AGAINST MISSION RIDGE STABLES, its directors, agents and employees for any loss of damage or injury or death I may sustain as a result of my own actions.

I agree to indemnify and hold harmless Mission Ridge Stables, its directors, agents and employees from any and all 3rd party claims initiated as a result of any act or omission of the undersigned or anyone for whom the undersigned is a guardian at the Mission Ridge Stables facility, or associated lands, for events alleged to have occurred at Mission Ridge Stables facilities or associated lands.

I understand that Mission Ridge Stables intends all users or observers of activities at Mission Ridge Stables facility, or any associated lands, sign this Release, Waiver of Claim and Assumption of Risk Warning. I have carefully read and accept the terms of this Release, Waiver of Claim and Assumption of Risk Warning. I acknowledge that no representation of fact or opinion, threat or inducement has been made or given by Mission Ridge Stables, its directors, agents or employees to induce the signing of this Release.

This Release, Waiver of Claim and Assumption of Risk are binding upon myself, my heirs, my executors, administrators, personal representatives, and assigns.

DATED: _____
(mm/dd/yyyy)

(Signature of Parent or Legal Guardian)

(Witness)

(Printed name of Student/Rider)

(Printed Name of Witness)

ACKNOWLEDGMENT OF RISK AND RELEASE OF LIABILITY

(AR-0103)

For Participants Under the Age of Majority in the Province or Territory in which the Equine Activities are Provided by the Host

WARNING: THIS AGREEMENT WILL AFFECT YOUR LEGAL RIGHTS. READ IT CAREFULLY!

The Parent/Guardian Must Read and Understand this Waiver Prior to Infant Participating in Equine Activities

The following waiver of all claims, release from all liability, assumption of all risks, agreement not to sue and other terms of this agreement are entered into by me on behalf of the Infant Participant named below with and for the benefit of:

_____, its directors, officers, employees, volunteers, business operators, agents, and site property owners or lessees (the "Host"). Without limiting the generality of the foregoing, "Equine Activities" includes but is not limited to competitions, tournaments organized and /or operated by the "Host", riding instruction, coaching and training provided by the "Host" to the Infant Participant.

Initial Each Item below after Reading and Understanding each item:

1. I am the Parent/Guardian of the Infant Participant and am executing this waiver on behalf of the Infant Participant in my capacity as Parent/Guardian and with the intent that this waiver be binding on myself and the Infant Participant for all legal purposes.
2. I am aware that there are inherent dangers, hazards and risks ("Risks") associated with "Equine Activities" and injuries resulting from these "Risks" are a common occurrence. I am aware that the "Risks" of "Equine Activities" mean those dangerous conditions which are an integral part of "Equine Activities", including but not limited to:
 - (a) the propensity of any equine to behave in ways that may result in injury, harm or death to persons on or around them and to potentially collide with, bite or kick other animals, people or objects;
 - (b) the unpredictability of an equine's reaction to such things as sounds, sudden movement, tremors, vibrations, unfamiliar objects, persons or other animals and hazards such as subsurface objects; and
 - (c) the potential for other participants to behave in a negligent manner that may contribute to injury to themselves or others, including failing to act within their abilities to maintain control over an equine.
 - (d) the potential of natural or man-made hazards being present that can cause me harm, including communicable disease
3. I freely accept and fully assume all responsibility for all "Risks" and possibilities of any and all personal injury, sickness, disease, medical payments, death, property damage or loss resulting from the Infant Participant's participation in "Equine Activities".
4. I agree that although the "Host" has taken steps to reduce the "Risks" and increase the safety of the "Equine Activities", it is not possible for the "Host" to make the "Equine Activities" completely safe. I accept these "Risks" and agree to the terms of this waiver on behalf of the Infant Participant, even if the "Host" is found to be negligent or in breach of any duty of care or any obligation to myself or the Infant Participant in the Infant's participation in "Equine Activities".
5. In addition to consideration given to the "Host" for the Infant Participant's participation in "Equine Activities", I and my heirs, next of kin, executors, administrators and assigns, as well as the Infant Participant and his/her heirs, next of kin, executors, administrators and assigns (collectively our "Legal Representatives") agree:
 - (a) to waive all claims that the Infant Participant has or may have in the future against the "Host";
 - (b) to release and forever discharge the "Host" from all liability for personal injury, death, property damage, or loss that I, the Infant Participant, or our "Legal Representatives" might suffer as a result of the Infant Participant's participation in "Equine Activities" due to any cause, including but not limited to negligence (failure to use such care as a reasonably prudent and careful person would use under similar circumstances), breach of any duty imposed by law, breach of contract or mistake or error in judgment of the "Host"; and
 - (c) to be liable for and to hold harmless and indemnify the "Host" from all actions, proceedings, claims, damages, costs demands, including court costs and costs on a solicitor and own client basis, and liabilities of whatsoever nature or kind arising out of or in any way connected with the Infant's participation in "Equine Activities".
6. I agree that this waiver and all terms contained herein are governed exclusively and in all respects by the laws of the Province or Territory of Canada in which the "Equine Activities" are provided by the "Host". I hereby irrevocably submit to the exclusive jurisdiction of the courts of that Province or Territory of Canada and I agree that no other court can exercise jurisdiction over the terms and claims referred to herein. Any litigation to enforce this waiver will be instituted in the Province or Territory of Canada in which the "Equine Activities" are provided by the "Host".
7. I confirm that I have had sufficient time to read and understand this waiver in its entirety. I understand that this agreement represents the entire agreement between the "Host", myself as Parent/Guardian, and the Infant Participant, and it is binding on myself, the Infant Participant and our "Legal Representatives".

Infant Participant's Name _____ Date of Birth _____

Address _____ City _____ Province _____ Postal _____

Parent/Guardian's Name _____ Date of Birth _____ Tel # _____

Address _____ City _____ Province _____ Postal _____

(Signature of Parent/Guardian of Infant Participant) Signed this _____ day of _____, 20____

(Print Name of "Host" Witness to Signing and Initialing)

(Signature of "Host" Witness)

ACKNOWLEDGMENT OF RISK AND RELEASE OF LIABILITY

(AR-0103)

For Participants Over the Age of Majority in the Province or Territory in which the Equine Activities are Provided by the Host

WARNING: THIS AGREEMENT WILL AFFECT YOUR LEGAL RIGHTS. READ IT CAREFULLY!

Every Person Must Read and Understand this Waiver Before Participating in Equine Activities

The following waiver of all claims, release from all liability, assumption of all risks, agreement not to sue and other terms of this agreement are entered into by me (the Participant) with and for the benefit of: _____

_____, its directors, officers, employees, volunteers, business operators, agents and site property owners or lessees (collectively the "Host"). Without limiting the generality of the foregoing, "Equine Activities" includes but is not limited to, competitions, tournaments organized and /or operated by the "Host", riding instruction, coaching and training provided by the "Host" to the Participant.

Initial Each Item below after Reading and Understanding each item:

1. I am aware that there are inherent dangers, hazards and risks (collectively "Risks") associated with "Equine Activities" and injuries resulting from these "Risks" are a common occurrence. I am aware that the "Risks" of "Equine Activities" mean those dangerous conditions which are an integral part of "Equine Activities", including but not limited to:
 - (a) the propensity of any equine to behave in ways that may result in injury, harm or death to persons on or around them and to potentially collide with, bite or kick other animals, people or objects;
 - (b) the unpredictability of an equine's reaction to such things as sounds, sudden movement, tremors, vibrations, unfamiliar objects, persons or other animals and hazards such as subsurface objects;
 - (c) the potential for other participants to behave in a negligent manner that may contribute to injury to themselves or others, including failing to act within their abilities to maintain control over an equine.
 - (d) the potential of natural or man-made hazards being present that can cause me harm, including communicable disease.
2. I freely accept and fully assume all responsibility for all "Risks" and possibilities of any and all personal injury, sickness, disease, medical payments, death, property damage or loss resulting from my participation in "Equine Activities".
3. I agree that although the "Host" has taken steps to reduce the "Risks" and increase the safety of the "Equine Activities", it is not possible for the "Host" to make the "Equine Activities" completely safe. I accept these "Risks" and agree to the terms of this waiver even if the "Host" is found to be negligent or in breach of any duty of care or any obligation to me in my participation in "Equine Activities".
4. In addition to consideration given to the "Host" for my participation in "Equine Activities", I and my heirs, next of kin, executors, administrators and assigns (collectively my "Legal Representatives") agree:
 - (a) to waive all claims that I have or may have in the future against the "Host";
 - (b) to release and forever discharge the "Host" from all liability for any personal injury, death, property damage, or loss resulting from my participation in the equine activity due to any cause, including but not limited to negligence (failure to use such care as a reasonably prudent and careful person would use under similar circumstances), breach of any duty imposed by law, breach of contract or mistake or error in judgment of the "Host"; and
 - (c) to be liable for and to hold harmless and indemnify the "Host" from all actions, proceedings, claims, damages, costs demands, including court costs and costs on a solicitor and own client basis, and liabilities of whatsoever nature or kind arising out of or in any way connected with my participation in "Equine Activities".
5. I agree that this waiver and all terms contained herein are governed exclusively and in all respects by the laws of the Province or Territory of Canada in which the "Equine Activities" are provided by the "Host". I hereby irrevocably submit to the exclusive jurisdiction of the courts of that Province or Territory of Canada and I agree that no other court can exercise jurisdiction over the terms and claims referred to herein. Any litigation to enforce this waiver will be instituted in the Province or Territory of Canada in which the "Equine Activities" are provided by the "Host".
6. I confirm that I have had sufficient time to read and understand this waiver in its entirety. I understand that this agreement represents the entire agreement between myself and the "Host", and it is binding on myself and my "Legal Representatives".
7. I confirm that I have reached the age of majority in the province in which I am participating in "Equine Activities".

Participant Name _____ Date of Birth _____ Tel # _____

Address _____ City _____ Province _____ Postal _____

(Signature of Participant) Signed this _____ day of _____, 20____

(Print Name of "Host" Witness to Signing and Initialing)

(Signature of "Host" Witness) Signed this _____ day of _____, 20____



WAIVER OF LIABILITY FOR ALL CLAIMS AND RELEASE OF LIABILITY

PLEASE READ CAREFULLY BEFORE SIGNING.

Completed waivers must be returned prior to entry and use of the Organization's facilities. This waiver does not affect accident and out-of-country travel insurance provided by the Organization where applicable.

By signing below, the Participant (named below) and/or the Participant's Guardian understands and acknowledges, the risks, dangers, and hazards which are inherent on entering all lands, properties, facilities, structures, installations, vehicles or equipment owned, leased, operated or otherwise controlled by the Organization (the "**Premises**"), which risks include, but are not limited to: the potential for bodily injury or illness (including contraction of COVID-19); contact or interaction with others who may have been exposed to COVID-19; close proximity to or contact with surfaces, equipment, fixtures, or other objects that, despite the Organization's efforts, may be infected with COVID-19 or other communicable illnesses; permanent disability, paralysis, or loss of life; collision with natural or manmade objects; tripping hazards; imperfect venue or field of play conditions; equipment failure; participants of varying skill levels; the negligent use of the Premises by others; inadequate safety measures or unsafe Premises; other circumstances known, unknown or beyond the control of the Organizer, its partners, sponsors, agents, affiliates, directors, employees, officers, therapists, or volunteers (together, the "**Releasees**"); or negligence or omission of the Releasees (collectively, the "**Risks**").

In consideration for allowing the Participant to use the Premises, the Participant and/or the Participant's Guardian: (a) release, discharge and forever hold harmless the Releasees from any and all liability for damages or loss arising as a result of the Risks arising from entry into or use of the Premises; (b) waive any right to sue the Releasees in respect of all causes of action (including for injuries or illness caused by their own negligence), claims, damages or losses of any kind that may arise as a result of the Risks or in connection with entry into or use of the Premises, including without limitation the right to make a third party claim or claim over against the Releasees arising from the same; and (c) freely assumes all risks associated with the Risks or anything incidental to the Risks, which may arise as a result of or in connection with use of the Premises. **YOU ARE GIVING UP LEGAL RIGHTS TO ANY AND ALL FUTURE CLAIMS AGAINST THE ORGANIZATION AND RELEASEES.**

I confirm that I have read and fully understand this waiver and release of liability. I sign this waiver and release of liability voluntarily without any inducement, assurance, or warranty being made to me.

Print Name: _____
the "**Participant**"

Date of Birth: _____
(mm/dd/yyyy)

Print Name: _____
the "**Guardian**" (if Participant is a minor)

Signature: _____
Participant or Guardian for minor

Date: _____
(mm/dd/yyyy)

Volunteering Rules

1. **Expectations** – what we ask of our volunteers is commitment and reliability, willingness to learn, effective communication, adherence to policies and procedures, and being kind and respectful to others. We are not a child care centre or a hang-out spot, and expect all volunteers to arrive ready to work for the full time they are at the barn, with the exception of much-deserved breaks!
2. **The Stable is a community. Please treat all members with respect, kindness, and consideration. Safe and courteous behavior of each volunteer, boarder, family member and guest is required at all times!**
3. **Waivers** - All volunteers must sign a waiver (or have a parent sign a waiver) before handling or riding any horses/ponies.
4. **Drop Off/Pick Up** - Volunteers can be dropped off no earlier than 9am, and picked up no later than 9pm

HOURS – Our volunteering hours from September-June - with the exception of Christmas break (2 weeks every year) - are:

- Tuesday and Thursday evenings from 4pm-9pm
- Saturday's from 9am-3pm.
- Summer hours
 - Please see our day camp schedule on www.missionridgestables.com. Volunteers are welcomed to help with camps from 9am – 3:30pm.
 - Outside of camp hours, volunteers can come on Tuesday and Thursday evenings from 4pm – 8pm.
 - **Saturday & Sunday in July/August:** For weekend volunteering, please text Lan at 780-906-5912. Please do not drop off children without first contacting Lan, as we do not have staff onsite all day.
- Birthday Parties / Events – please text Lan for information on extra volunteering hours for parties or other functions and events.
- **No volunteers may be dropped off at the farm outside of the above listed hours without first speaking to Lan. We do not have staff onsite 24/7 and must have adult supervision available for volunteers**

5. **Footwear** - Everyone handling horses/ponies MUST wear closed-toed footwear → no flip flops/sandals.
6. **Phones** – the barn is a very busy place so we ask that volunteers are not on their phones while around the horses, while helping in the arena, or when helping with day camps. There is no recording of any person on property allowed without their permission.
7. **Dogs** - No dogs are permitted out of vehicles on the premises unless cleared with stable management

8. **Staff** - Volunteers are expected to listen to and follow the instructions of all staff members at all times, regardless of who is working at that time. *Current staff: Christel, Lan, Meaghan, Candace, Kailey, Ginger, Jamie.
 - ***Volunteers helping with a riding lesson must not leave the arena without checking in with the instructor first***
9. **Tack and Equipment** – It is extremely important that volunteers return horse tack and equipment to its proper spot in the tack room. This includes horse and miniature pony halters and lead ropes, saddles, bridles, half pads, etc. We also ask that any buckets used are returned to the barn and not left on the roadways or in the pastures.
10. **Pastures / Pens / Paddocks** – Volunteers are not allowed to enter **any** horse pastures, paddocks, or pens without directly being asked by a staff member to retrieve a horse, or complete a different task. Upon catching a horse or completing a volunteering task, volunteers should immediately leave the pasture/paddock/pen.
11. **Riding** – There is to be no riding of any horse during volunteer time. Volunteers may not sit on horses out in the pasture, including if they are lying down
12. **Supervision** – Staff must be aware of where volunteers are at all times. Upon completing a task, volunteers need to check in with a staff member before going for lunch, moving onto another task, leaving the property, etc. We ask that all volunteers respect that our staff are at the farm to look after the animals, and should not have to walk around the property to look for a volunteer that has disappeared.
13. **Feed Areas** – Volunteers are not to make horse feeds or open any bins without direct supervision by a staff member.
14. **Language** – Mission Ridge Stables is a family-friendly facility and expects all staff and volunteers to use appropriate language at all times – particularly when around kids and clients.