

HORSE RIDING AGREEMENT AND LIABILITY RELEASE FORM

First Name:	Last Name	
	ngel and Jules for Others hereinafter referred to as Angel and Jules for Others rive Colts Neck, NJ 07722	
PLEASE READ CAREFU	ULLY BEFORE SIGNING	
SERIOUS INJURY MAY NOT GUARANTEE YOU THAT:	RESULT FROM YOUR PARTICIPATION IN THIS ACTIVITY. Angel and Jules for Others DOES JR SAFETY OR THAT OF YOUR HORSE. IT IS HEREBY AGREED TO AS FOLLOWS	
the "RIDER", and the participate in horse riding	RIDERS AND AGREEMENT PURPOSE I, the following individual hereinafter known as rents or legal guardians thereof if a minor, do hereby voluntarily request and agree to g at Angel and Jules for Others, and that this RIDER will ride his/her own horse led by RIDER own arrangement while at camp from ,/ to/	
RIDER NAME :		
B. AGREEMENT SCOPI me the registered RIDEF including all minor childre	E AND TERRITORY AND DEFINITIONS – This agreement shall be legally binding upon R, and the parents or legal guardians thereof if a minor, my heirs, estate, assigns, en, and personal representatives; and it shall be interpreted according to the laws of a State of New Jersey. Any disputes by the RIDER shall be litigated in and venue shall be	
shall refer to riding or oth mounted. The term "RID comes near a horse, pony,mule, do	in shall refer to all equine species. The term "HORSEBACK RIDING" or "RIDING" herein nerwise handling of horses, ponies, mules, donkeys, cattle, goats, or lambs whether from the ground ER" shall herein refer to a person who rides a horse mounted or otherwise handles or onkey, cattle, goat, or lambs from the ground. 'shall herein refer to the above registered rider and the parents or legal guardians thereof	nd
RECREATIONAL SPOR always present in such a Surveillance Systems of people relative to injuries	SSIFICATION – Horseback riding is classified as a RUGGED ADVENTURE RT ACTIVITY, and that there are numerous obvious and non-obvious inherent risks activity despite all safety precautions. According to NEISS (National Electronic Injury United States Consumer Products) horse activities rank 64th among the activities of a that result in a stay at U.S. hospitals. Related injuries can be severe, requiring moreing in more lasting residual effects than injuries in other activities.	
40 times more powerful, generally be at a distance riding is the only sport who become a unit of movem each has a limited under and act according to its response to the second s	HORSES – No horse is a completely safe horse. Horses are 5 to 15 times larger, 20 to and 3 to 4 times faster than a human. If a rider falls from a horse to ground it will see of from 31/2 to 51/2 feet, and the impact may result in injury to the rider. Horseback here a much smaller, weaker predator animal (human) tries to impose its will on, and nent with, another much larger, stronger prey animal with a mind of its own (horse) and restanding of the other. If a horse is frightened or provoked it may divert from its training natural survival instincts which may include, but are not limited to: stopping short, beed at will; shifting its weight; bucking; rearing; kicking; biting; or running from danger	
the horse. The RIDER'S	LITY – Upon mounting a horse and taking up the reins, the RIDER is in primary control of safety largely depends upon his/her ability to carry out simple instructions, and his/her d aboard the moving animal. The RIDER shall be responsible for his/her own safety.	



nature that can scare a horse, cause it to fall, or react in some other unsafe way. SOME EXAMPLES ARE: thunder, lightening, rain, wind, wild and domestic animals, insects, reptiles, which may walk, run, fly near, bite and/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. G. INPSECTION OF PREMISES – RIDER is satisfied that all conditions are reasonably safe for RIDER'S intended purpose, usage and presence upon the Property of Angel and Jules for Others. H. ACCIDENT/MEDICAL AND PERSONAL LIABILITY INSURANCE - Should medical treatment be required, I and/or my own accident/medical insurance company shall pay for all such incurred expenses. My accident/medical insurance company is______ and my policy number is ______. Should my actions or that of my horse cause injury or damage of any kind, I and/or my own personal liability shall pay for such damages. My personal liability insurance company is______ and my policy number is _____. I. PROTECTIVE HEADGEAR WARNING - I have been fully warned and advised by Angel and Jules for Others that the RIDER should wear protective headgear (riding helmet), and that the wearing of such headgear while mounting, riding, dismounting, and otherwise being around horses, may prevent or reduce severity of some head injuries and even prevent death from happening as the result of a fall or other occurrence. Minors 16 and under are required to wear protective headgear. (initials). J. LIABILITY RELEASE - In consideration of Angel and Jules for Others allowing my participation in this activity, under the terms set forth herein. I, the RIDER, and the parent or guardian thereof if a minor, do agree to hold harmless and release Angel and Jules for Others, its owners, agents, employees, officers, members, premises owners, insurers, and affiliated organizations from legal liability due to Angel and jules for Others ordinary negligence; and I do further agree I shall not bring any claims, demand, legal actions and causes of action, against Angel and Jules for Others and/or its associates, for any economic and non-economic losses due to bodily injury, death, property damage, sustained by me and/or my minor child or legal ward in relation to the premises and operations of Angel and Jules for Others, to include while riding, handling, or otherwise being near horses owned by or in the care, custody and control of Angel and Jules for Others. All Riders and Parents or Legal Guardians must sign below after reading this entire document: SIGNER STATEMENT OF AWARENESS I/WE, THE UNDERSIGNED, HAVE READ AND DO UNDERSTAND THE FOREGOING AGREEMENT, WARNINGS, RELEASE AND ASSUMPTION OF RISK. I/WE FURTHER ATTEST THAT ALL FACTS RELATING TO THE APPLICANT ARE TRUE AND ACCURATE. SIGNATURE OF RIDER (Parent must sign for rider 17 & under.) (Please print) SIGNATURE OF PARENT, or GUARDIAN Address in full: Home Phone #: Bus. Phone #:

F. CONDITIONS OF NATURE - Angel and Jules for Others is NOT responsible for total or partial acts, occurrences, or elements of