

PATTERSON TRAINING, LLC

Shari Patterson-Blaylock

Judy Mackenzie

272 S. Sprague Dr.
Star Valley, AZ 85541

Cell (928)978-4478
Home (928)474-1732

RELEASE

I, the undersigned (or parent or guardian) request permission for _____
to enter the premises located at 272 S. Sprague Dr., Star Valley, Arizona and to participate in various horse related activities. I know that the temperament and the character of horses are unpredictable. I know that there are risks not limited to, but including, the animals' biting, kicking, running away, shying, or my or my child's falling off the animal. I have inspected the premises and I know the risks and dangers involved in such activities, and that unanticipated and unexpected dangers may arise during such activities, and I assume all risk of my or my child's property that maybe sustained in connection with the stated and associated activities, in and about the premises.

In consideration of the permission granted to me to enter the premises and participate in the stated activities, I hereby, for myself, my heirs, administrators, and assigns; release, remise, and discharge the owners, operators, and sponsors of the premises and officials, and all other participants in the stated activities of any sort, for injury sustained to my person and/or property or that of my child during my presence or theirs on the premises and my participation in the stated activities do to negligence or any other fault.

I represent and certify that my true age is over 18 years, and if I am under the age of 18 years, I represent and certify that I have the permission of my parents and/or guardians to participate in the stated activities, and that they have full knowledge thereof.

I certify that my attendance and participation of the stated activities is voluntary, and that I am not, in any way, the employee, servant, or agent of the owners, operators, or sponsors of the premises and the activities therein.

I understand that under Arizona Law, pursuant to A.R.S. s12-553 an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in equine activities resulting from the inherent risks of equine activities.

I have read and understand the foregoing request and release.

X

Signature

Date

Parent or Guardian