



**VOLUNTEER RELEASE OF LIABILITY PLEASE WRITE CLEARLY**

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

Address: \_\_\_\_\_  
 \_\_\_\_\_

Phones: \_\_\_\_\_

Email: \_\_\_\_\_ DOB: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

If a High School student:

School \_\_\_\_\_ Community Service Hours desired: \_\_\_\_\_

Experience \_\_\_\_\_

In consideration for being permitted to participate in any way in Horse and farm animal related activities, I hereby agree, acknowledge and appreciate that I hereby release and hold harmless with respect to any and all injury, disability, death, loss or damage to person or property, whether caused by negligence or otherwise, the following named persons or entities, herein referred to as Releasee, Pattie's Ranch home of STAT Horse Sanctuary. I agree to release the Releasee, their officers, directors, employees, representative, agents, volunteers and vessels from liability and responsibility whatsoever and for any claims or cause of action that I, my estate, heirs, survivors, executors or assigns may have for personal injury, property damage or wrongful death arising from the above activities whether caused by active or passive negligence of the Releasee or otherwise. By executing this document, I agree to hold the Releasee harmless and indemnify them in conjunction with any injury, disability, death, loss or damage to person or property that may occur as a result of engaging in the above activities. I hereby allow the use of any picture of me or my family taken while at the ranch to be used by STAT Horse Sanctuary or its agents for such items as but not limited to website, brochure, banners and other marketing materials.

By entering into this agreement, I am not relying on any oral or written representation or statements made by the releases, other than what is set forth in this Agreement. This release shall be binding to the fullest extent permitted by law if any provision of this release is found to be unenforceable; the remaining terms shall be enforceable.

I have read this release of liability and assumption of risk agreement and I fully understand its terms and understand that I have given up legal rights by signing it and I sign it freely and voluntarily without any inducement.

\_\_\_\_\_  
 Signature Print Name

Date: \_\_\_\_\_

*Where saving horses lives changes peoples lives.*

**DONATE \* SPONSOR \* VOLUNTEER**

2100 South State Street, Diamond Valley, CA 92543

[www.STATHorseSanctuary.org](http://www.STATHorseSanctuary.org) 951-733-3000 STATHorseSanctuary@gmail.com