RELEASE FORM: VON DOELER'S RANCH

Please Read Carefully!			
Participant Name:		Date of Birth:	
Address:	City:	Province:	
Postal Code/Zip: Ema	il:		
Phone # ()	How did	l you hear of us:	
On my behalf, and on behalf of any minor chile ASSUMPTION OF RISKS I am aware and understand that activities involu- 1. Horses, which are powerful and potentially kick, or step on people or things. 2. Horses may collide with other horses or ob 3. Negligence (which means, in general terms within my or my child's ability or within designal 4. Equipment may fail. 5. Weather conditions can change and can so 6. The nature of the terrain can change and horeeks. 7. The activities can sometimes be in remote other type of assistance. 8. Negligence on the part of a PROPERTY O referred to above exist throughout the trail, state caution, experience or instruction can eliminate possibility of personal injury, death, property of RELEASE OF LIABILITY, WAIVER OF CLAII In consideration of the Provider providing me facilities and the Property Owners providing me agree as follows: 1. TO WAIVE ANY AND ALL CLAIMS that I on employees, agents, representatives, and volut RELEASES from any and all liability for any lor result of my or my child's use of the service or STATUTORY OR OTHER DUTY OF CARE IN THE RELEASES. 2. TO HOLD HARMLESS AND INDEMNIFY T resulting from my or my child's use of the service 3. This agreement shall be effective and bind 4. This agreement shall be governed by and if 5. Any litigation involving the parties this Agre In entering into this Agreement, I am not relying this agreement. I HAVE READ AND UNDERSTAND THIS AG WAIVING CERTAIN LEGAL RIGHTS WHICH REPRESENTATIVES MAY HAVE AGAINST T For participants who are under the age of 18 y	dren participating in these activiti olving these horses involve many dangerous animals, may change jects or trip, stumble or fall even s, a failure to exercise ordinary o ated areas and trails. Ometimes be dangerous. has certain risks associated with i areas and injuries or illness may WNER AND/OR THE PROVIDE able, practice and other areas an te all of the risks involved and I fr amage and damages or loss ress MS AND INDEMNITY AGREEM for my child with their horse or of the re or my child with their horse or of the re or my child with the use of the r my child have or may in the futur nteers (all of whom are hereinaft iss, damage, injury or expense the of ue to any cause whatsoever, II ICLUDING ANY DUTY OF CARE FHE RELEASES from any and al- nices. ing upon my or my child's death interpreted in accordance with the mement shall be brought within the ag upon any oral or written repress REEMENT AND I AM AWARE T I I, MY CHILD, MY HEIRS, NEXT FHE RELEASES .	ties, for whom I am legally responsible, I agree to the following: y risks, dangers and hazards, including, but not limited to the following: ge their behaviour at any time and may, without warning, jump, run wild in if being led, ridden, or attended to. or proper care) of other riders or my or my child's own failure to ride safe it including, but not limited to, exposed natural objects, trees, streams y occur and it may be a considerable distance to doctors, hospitals, or ER OF THEIR STAFF. I am also aware that the risks, dangers and hazards and many are unmarked. I understand and acknowledge that no amoun reely accept and fully assume all such risks, dangers and hazards and sulting there from. IENT ther services and permitting my or my child's user of their equipment, a eir property (hereinafter collectively referred to as "The Services"), I her ture have against a Property Owner or the Provider and their directors, ter collectively referred to as "THE RELEASES") and TO RELEASE TH that I or my child may suffer, or that my or my child's next of kin may su INCLUDING NEGLIGENCE, BREACH OF CONTRACT, OR BREACH E OWNED UNDER THE "OCCUPIER'S LIABILITY ACT" ON THE PAF all liability for any damage to the property of or personal injury to any th or incapacity. he laws of the province of Ontario: and	dly, buck, afely, afely, s and - any zards nt of d the and other ereby , officers, HE uffer as a I OF ANY RT OF hird party forth in
Signed this day of	, 2019		
I,(p	print name) am declining the of	ffered ASTM certified riding helmet provided for my safety.	
I acknowledge any and all risks associated		net as stated above.	
		SIGNATURE	

ASSUMPTIONS OF RISKS, RELEASE OF LIABILITY, WAIVER OF CLAIMS, AND INDEMNITY AGREEMENT BY SIGNING THIS AGREEMENT YOU WILL WAIVE CERTAIN LEGAL RIGHTS INCLUDING THE RIGHT TO SUE.