RELEASE FORM: VON DOELER'S RANCH Please Read Carefully!

Participant Name:	Date of Birth:	Phone #:()	
Address:				
Postal/Zip:Email:		How did you hear	of us:	_
On my behalf, and on behalf of any modilowing: ASSUMPTION OF RISKS I hazards, including, but not limited to their behavior at any time and may, wo with other horses or objects or trip, staterms, a failure to exercise ordinary of child's ability or within designated areadangerous. 6. The nature of the terrainatural objects, trees, streams and creating it may be a considerable distance to complete throughout the trail, stable, practice and caution, experience or instruction can and hazards and the possibility of per LIABILITY, WAIVER OF CLAIMS AND their horse or other services and permoditing me or my child with the use follows: 1. TO WAIVE ANY AND ALL of Provider and their directors, officers, officers or the service or due to any cause whatsoev STATUTORY OR OTHER DUTY OF OACT" ON THE PART OF THE RELEAT for any damage to the property of or pagreement shall be effective and bind interpreted in accordance with the law brought within the Province of Ontario statements made by the Releases oth AGREEMENT AND I AM AWARE THALEGAL RIGHTS WHICH I, MY CHILD REPRESENTATIVES MAY HAVE AGAWAIVER OF CLAIMS, AND INDEMNITIVE OF CLAIMS.	am aware and understand the following: 1. Horses, which thout warning, jump, run wild umble or fall even if being led proper care) of other riders of as and trails. 4. Equipment man can change and has certain eeks. 7. The activities can so loctors, hospitals, or any other THEIR STAFF. I am also and other areas and many are eliminate all of the risks involutional injury, death, property of INDEMNITY AGREEMENT witting my or my child's use of of their property (hereinafter of their property (hereinafter of their property (hereinafter of their property) (hereinafter of th	at activities involving he are powerful and pote ly, buck, kick, or step of ridden, or attended to or my or my child's own ay fail. 5. Weather conditions associated with it metimes be in remote a trype of assistance. 8. ware that the risks, dan unmarked. I understand lyed and I freely accept damage and damages of In consideration of the fatives, and volunteers of their equipment, and of collectively referred to a few or may in the future in their equipment. The strives, and volunteers of the strives, and volunteers of the strives, and volunteers of the strives. The suffer as a recent strives of the suffer and all lias of kin may suffer as a recent suffer and suff	orses have many risks, dantially dangerous animals in people or things. 2. Hor 3. Negligence (which me failure to ride safely, with ditions can change and cat including, but not limited reas and injuries or illness. Negligence on the part of gers and hazards referred and acknowledge that in and fully assume all such or loss resulting there from Provider providing me or ther facilities and the Property of (all of whom are hereinaff ability for any loss, damage esult of my or my child's effect, OR BREACH OF JNDER THE "OCCUPIEF HE RELEASES from any my child's use of the series agreement shall be govolving the parties this Agron any oral or written repead AND UNDERSTAND AY FORWARD, I AM WA STRATORS, ASSIGNS ANS OF RISKS, RELEASITYOU WILL WAIVE LEGATION.	angers and s, may change ses may collide eans, in general ain my or my an sometimes be do to, exposed as may occur and for a PROPERTY do above exist no amount of a risks, dangers in. RELEASE OF my child with perty Owners by agree as owner or the der collectively lee, injury or use of the ANY and all liability vices. 3. This erned by and reement shall be resentation or D THIS IVING THE AND/OR E OF LIABILITY,
For participants who are under the ag	e of 18 years I hereby assum	e full responsibility for a	all liabilities of the above i	named
participant.				
Print Name of Parent/Guardian if Part Signature of Parent or Guardian				
Signed on this day of	month, 20)		
l,	(print name) am declin	ing the offered ASTM c	ertified riding helmet prov	rided for my
safety. I acknowledge any and all risk	s associated without wearing	a safety helmet.		
	_ (signature)			