

620 Garwood Road Moorestown, NJ 08057 856-231-7552



FACILITY USE AGREEMENT

MAJODA STABLES, INC., agrees to allow

(student name) to use

its facilities provided he/she agrees to the following conditions:

I have inspected the premises and understand the risks and dangers involved in handling horses and horseback riding activities and that unanticipated and unexpected dangers may arise during such activities. I assume all risks of injury to my person or child and to any personal property sustained in connection with the stated and associated activities on and about the premises.

UNDER NEW JERSEY LAW, AN EQUESTRIAN AREA OPERATOR IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ANIMAL ACTIVITIES RESULTING FROM THE INHERENT RISK OF EQUINE ANIMAL ACTIVITIES, PURSUANT TO P.L., CHAPTER 287.

In consideration of the permission granted to me (and/or my child) to enter the premises, I hereby, for myself, my child, my heir's administrators and assigns, release, remiss, and discharge MAJODA STABLES, INC., its relatives, respective agents, landlord, employees, and all other participants in the interaction with horses, horse care, and the activity of horseback riding and instruction (including boarding of horses) from all claims, demands, actions, and causes of action of any sort for injury sustained to my person, child, guest, or property during my presence on the premises and participation in horse care and horseback riding, except in the event of the Stables wanton and willful negligence.

I have read this entire document and agree to assume the risks involved with horseback riding and horse care.

Signed:		Date:
I/We (the parents of)		are in full recognition of the dangers activities, and agree to assume the risks
Parent's Signature:		Date:
Parent's Printed Name:		
Address:		
Phone:	[] cell [] home	Student Date of Birth:
E-Mail:		
I DO / DO NOT (circle ch	noice) give consent to M	lajoda Stables to use photographic or video

images of my child. Initial here: