



High Standard Stables Indemnification and Liability Release Form

Student: _____ Age (if minor) _____

Legal Guardian/Parent (if minor): _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Cell Phone: _____ Texts allowed: Yes ___ No ___

Contact in case of emergency: Name: _____

Cell# _____ Relationship to rider: _____

Please read carefully before signing this form. Death or serious injury may result from your participation in this activity. Amy Becker does not guarantee your safety.

I agree that: Should medical treatment be required, I and/or my own accidental/medical insurance company shall pay for all such incurred expenses. My accidental/medical Insurance Company is _____ and my policy number is _____.

Undersigned assumes responsibility and risk for injury or death to self or to minor child; holds harmless High Standard Stables and Amy Becker for any injury or death to riders and spectators; undersigned assumes total responsibility for any and all payments for medical treatment; undersigned holds harmless High Standard Stables and Amy Becker, for lost, stolen, or destroyed property.

**UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICES AND REMEDIES CODE),
AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR DEATH OF
A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT
RISKS OF ALL EQUINE ACTIVITIES.**

Signing below means the Undersigned has read and understands the contract terms.

Signature (Parent Signature if student is a minor) _____

Date _____