SADDLE FITTING CLINIC JUNE 28, 2025 1:00pm RAIN OR SHINE

REGISTRATION FEE \$80 AUDITING FEE \$30 DUE AT TIME OF REGISTRATION

Presented by Tina Fox

Name	
Address	
CITY	STATEZIP
PHONE	EMAIL
REGISTRATION \$80	AUDIT \$30 Day Pass \$25
IF YOU WANT TO PLAY ON TH	E OBSTACLES OR RIDE THE TRAILS YOU WILL NEED TO PURCHASE A
DAY PASS IF YOU ARE NOT AL	READY CAMPING WITH US.
IF YOU ARE CAMPING WITH US A DAY PASS IS NOT REQUIRED.	
REGISTRATION FORM CAN BE	E EMAILED TO GEITNERHOMESTEAD@GMAIL.COM OR MAILED WITH
YOUR PAYMENT TO: GEITNER	HOMESTEAD 5086 COUNTY ROAD I, STURGEON BAY, WI 54235
CREDIT CARD PAYMENTS CAN BE MADE BY CALLING 920-493-7669.	
For Office Use Only PAID COGGINS	If you are bringing a horse, you must have a current negative Coggins. Please turn in at the office when you arrive, or email before the show. Deposits are non-refundable. If you need to cancel a gift certificate will be issued.
TACK OR IN THE INSTRUCTION OF UPON AN EQUINE IS NOT LIABLE FO	GED FOR COMPENSATION IN THE RENTAL OF EQUINES OR EQUINE EQUIPMENT OR A PERSON IN THE RIDING OR DRIVING OF AN EQUINE OR IN BEING A PASSENGER OR THE INJURY OR DEATH OF A PERSON INVOLVED IN EQUINE ACTIVITIES RISKS OF EQUINE ACTIVITIES, AS DEFINED IN SECTION 895.481(1)(E) OF THE
INHERENT IN PARTICIPATING IN TH	HAT I HAVE READ, KNOW, UNDERSTAND, AND APPRECIATE THE RISKS THAT ARE IS EVENT. I UNDERSTAND THAT I AM PERMANENTLY GIVING UP SUBSTANTIAL TED TO, MY RIGHT TO SUE. I HEREBY ASSERT THAT MY PARTICIPATION IS LY ASSUME ALL SUCH RISKS.
SIGNATURE	DATE
(Waiver Printed on back of this form)	

I agree that as a participant/parent/guest of Geitner Homestead Equine Campground, I am responsible for my/my child's/any children in my care, (children being nieces, nephews, grandchildren, or friends that are not your biological children) safety while staying/visiting the property. I understand that Geitner Homestead Equine Campground is not responsible for the supervision of my children in my care, or my children's safety. I specifically RELEASE AND DISCHARD, in advance, Geitner Homestead Equine Campground from any and all liability, whether known or unknown, even though the liability may arise out of negligence or carelessness on the part of the sponsors. I agree to accept all responsibility for the risks, conditions, and hazards that my occur whether they now or known or unknown.

Therefore, in consideration of the services performed by Geitner Homestead Equine Campground and for other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the Participant/Parent/Guest hereby knowingly, intentionally, purposively, freely, voluntarily, and without duress executes this release under the terms below:

- 1. **Release and Waiver.** Participant/Parent/Guest does hereby FOREVER release, discharge, indemnify, hold harmless, defend, exonerate, and covenant not to sue Geitner Homestead Equine Campground and its owners, employees, staff, agents, successors, and assigns from, against, or with respect to any and all liability, claims, or demands of any kind or nature whatsoever, whether at law, in equity, or otherwise, which arise or may hereafter arise directly or indirectly from participation.
 - Participant/Parent/Guest SPECIFICALLY UNDERSTANDS AND AGREES that this Release FOREVER DISCHARGES Geitner Homestead Equine Campground and its owners, employees, staff, agents, successors, and assigns from any and all liability or claim that the Participant/Parent may have against Geitner Homestead Equine Campground, and its owners, employees, staff, agents, successors, and assigns, with respect to any bodily injury, personal injury, illness, death, or property damage or loss that may result, directly or indirectly, from participation, whether caused by the negligence of Geitner Homestead Equine Campground, its owners, employees, staff, agents, or otherwise, and in all cases to the fullest extent permitted by applicable law.
 - Participant/Parent also understands that Geitner Homestead Equine Campground does not and shall not assume any responsibility for or obligation to provide financial assistance or other assistance to Participant/Parent, including, but not limited to, medical, health, or disability insurance in the event of injury, illness, or other claim or loss.
- 2. **Medical Treatment.** Volunteer does hereby FOREVER release, discharge, indemnify, hold harmless, defend, exonerate, and covenant not to sue Geitner Homestead Equine Campground, and its owners, employees, staff, agents, successors, and assigns from any and all liability or claim whatsoever which arises or may hereafter arise, directly or indirectly, on account of any first aid, treatment, or medical service rendered in connection with the Participant/Parent's Activities with sponsoring agencies working with Geitner Homestead Equine Campground.
- 3. **Assumption of Risk.** The Volunteer SPECIFICALLY UNDERSTANDS AND AGREES that participation is hazardous to Participant/Parent/Guest. Participant/Parent/Guest hereby expressly, specifically, knowingly, intentionally, purposively, personally, and solely assumes all risk of injury or harm which may result, directly or indirectly, from during, or with respect to participation, and FOREVER releases, discharges, indemnifies, holds harmless, defends, exonerates, and covenants not to sue Geitner Homestead Equine Campground, and its owners, employees, staff, agents, successors, and assigns from all liability or claim for injury, illness, death, or property damage or loss resulting from or with respect to participation.
- 4. **Insurance.** The Participant/Parent/Guest understands and agrees that Geitner Homestead Equine Campground does not and shall not carry or maintain health, medical, or disability insurance coverage for any Participants/Parents/Guest.
- 5. Other. Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Wisconsin United States of America, and all other applicable laws, rules, and regulations wherever found, and that this Release shall be governed by and interpreted in accordance with the internal laws of the State of Wisconsin, United States of America. Jurisdiction and venue for any actions with respect to this Release shall only be had (excluding all other jurisdictions) in a tribunal of competent jurisdiction in Door County, State of Wisconsin, United States of America. Participant/Parent/Guest agrees that in the event that any clause or provision of this Release shall be held to be invalid by any tribunal of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be fully enforceable.

I SPECIFICALLY ACKNOWELDGE THAT I PERSONALLY HAVE READ THE PREVIOUS PARAGRAPHS, AND I KNOW, UNDERSTAND, AND APPRECIATE THE RISKS THAT ARE INHERENT IN PARTICIPATING IN THIS EVENT. I UNDERSTAND THAT I AM PERMANENTLY GIVING UP SUBSTANTIAL RIGHTS, INCLUDING, BUT NOT LIMITED TO, MY RIGHT TO SUE. I HEREBY ASSERT THAT MY PARTICIPATION IS VOLUNTARY AND THAT I KNOWINGLY ASSUME ALL SUCH RISKS.