RISING HOPES & DREAMS

VOLUNTEER LIABILITY RELEASE FORM

WITNESS THIS RELEASE dated this _____ day of _____, 20__, by and between Todd & Britni Myers, hereinafter referred to as Management, and _____, hereinafter referred to as Volunteer, and, if Volunteer is a minor, Volunteer's parent or guardian, _____. For consideration received, and in return for the use, today and on all future dates of the property, facilities and services of Management, Management's instructors, employees, drivers and agents; Volunteer, Volunteer's heirs, assigns, and representatives, hereby agree as follows:

1. Inherent Risks and Assumption of Risk. The undersigned acknowledges there are inherent risks associated with equine activities such as described below, and hereby expressly assumes all risks associated with participating in such activities. The inherent risks include, but are not limited to the propensity of equines to behave in ways such as, running, bucking, biting, kicking, shying, stumbling, rearing, falling or stepping on, that may result in an injury, harm or death to persons on or around them; the unpredictability of equine's reaction to such things as sounds, sudden movement and unfamiliar objects, persons or other animals; certain hazards such as surface and subsurface conditions; collisions with other animals; the limited availability of emergency medical care; and the potential of a participant to act in a negligent manner that may contribute to injury to the participant or others, such as failing to maintain control over the animal or not acting within such participant's ability.

Volunteers acknowledge that horses, by their very nature, are unpredictable and subject to animal whim. Volunteer assumes all risks in connection therewith and expressly waives any claims for any injury or loss arising therefrom. Volunteers agree to abide by and follow Manager's rules and regulations which shall be posted and/or available from time to time. Volunteer further acknowledges that the behavior of any animal is contingent to some extent upon the ability of Volunteer. Volunteer assumes all risks therefore and warrants a full and fair disclosure of Rider's abilities has been made to Manager.

Volunteer expressly releases Management from any and all claims for personal injury or property damage, even if caused by negligence (if allowed by the laws of this State) by Management or its representatives, agents or employees.

WARNING

UNDER IOWA LAW, A DOMESTICATED ANIMAL PROFESSIONAL IS NOT LIABLE FOR DAMAGES SUFFERED BY, AN INJURY TO, OR THE DEATH OF A PARTICIPANT RESULTING FROM THE INHERENT RISKS OF DOMESTICATED ANIMAL ACTIVITIES, PURSUANT TO IOWA CODE CHAPTER 673. YOU ARE ASSUMING INHERENT RISKS OF PARTICIPATING IN THIS DOMESTICATED ANIMAL ACTIVITY.

2. agrees to assume any and all risks involved in or arising out of Volunteer's use of any

c 2000 Cottonwood Equestrian Publications

equipment or livestock pertaining to the rental of horses or taking of riding lessons, the use of any arena on the premises of Management and for purposes of taking riding lessons either on the premises or lessons given off the premises by Management personnel.

3. VOLUNTEER (OR VOLUNTEER'S PARENT OR GUARDIAN IF VOLUNTEER IS A MINOR) AGREES TO HOLD HARMLESS, INDEMNIFY AND DEFEND MANAGEMENT AGAINST ANY AND ALL CLAIMS, DEMANDS, CAUSES OF ACTION, DAMAGES, JUDGMENTS, ORDERS, COSTS OR EXPENSES, INCLUDING ATTORNEY'S FEES, WHICH MAY IN ANY WAY ARISE FROM OR BE IN ANY WAY CONNECTED WITH USER'S USE OF OR PRESENCE UPON THE PROPERTY OF MANAGEMENT AND THE FACILITIES LOCATED THEREON. In the event Volunteer is a minor, the parent or guardian shall further indemnify, defend and hold Management harmless from any such claims by said minor child.

4. In the event Volunteer is using Volunteer's own horse, or a horse(s) not owned by Management, Volunteer warrants said horse(s) shall be free from infection, contagious or transmittable diseases. Management reserves the right to refuse access or use of any horse upon the premises that does not appear to Management to be in good health or is deemed dangerous or undesirable.

5. Any action brought under this agreement shall be brought within one (1) year of the incident or accident, giving rise to said claim. Volunteers agree that damages shall be limited to $250 for property damage, actual expenses incurred, and a maximum of $10,000 for non-consequential damages such as pain and suffering.

6. Volunteer agrees to waive the protection of any applicable statutes in this jurisdiction whose purpose, substance and/or effect is to provide that a general release shall not extend to claims, material or otherwise, which the person giving the release does not know or suspect to exist at the time of executing said release.

Medical Release Horse/Rider

I further agree to allow and be financially responsible for any necessary emergency medical treatment by any available physician at any available medical institution in the event of my injury or illness. I have read and understand this liability release. Date ____ /_____ / _____

Print Name	Rider Signature /Parent Signature
1._____	1. _____
2._____	2. _____
3._____	3. _____
4._____	4. _____

_____(Signature of Guardian if Rider is a Minor)

Please continue on back side if more riders

c 2000 Cottonwood Equestrian Publications

_____
Street Address (Please print legibly as we use your address for mail outs)

_____ _____
City St. Zip Phone or cell

E-Mail: _____@_____

Please e mail me information regarding activities:
Charming Pony Parties. ____ Unicorn Parties: _____ Riding Lessons ___
Date Night ___ Themed Parties ____ Horse Summer Camp ___
Goat Yoga ____

Lessons and Camp only: In Case of Accident Notify:_____
Phone: _____

_____ _____

_____
Parent or Guardian if User is A Minor

Rising Hopes & Dreams Stables
55284 237th Street
Glenwood IA 51534
(712)314-0927

c 2000 Cottonwood Equestrian Publications

PHOTO RELEASE FORM

I hereby grant permission to *Rising Hopes and Dreams Stable* to use photographs and/or video of me/my child taken on at 55284 237th Street Glenwood Iowa 51534 in publications, news releases, online, and in other communications related to the mission of Rising Hopes and Dreams Stables.

_____

(Signature of Adult, or Guardian of Children under age 18)

I hereby DO NOT grant permission to *Rising Hopes and Dreams Stable* to use photographs and/or video of me/my child taken on at 55284 237th Street Glenwood Iowa 51534 in publications, news releases, online, and in other communications related to the mission of Rising Hopes and Dreams Stables.

_____

(Signature of Adult, or Guardian of Children under age 18)

Name _____

Address _____

_____

Phone (day)_____(evening)_____

Email Address (optional) _____

c 2000 Cottonwood Equestrian Publications