

RIDING INSTRUCTION AGREEMENT AND LIABILITY RELEASE FORM FOR INDIVIDUALS

This form must be completed by and for each participant for
HEARTLAND RANCH EQUESTRIAN CENTER, INC. 12139 Moreno Ave. Lakeside, CA 92040

PLEASE READ CAREFULLY BEFORE SIGNING

SERIOUS INJURY MAY RESULT FROM YOUR PARTICIPATION IN THIS ACTIVITY. THIS FACILITY DOES NOT GUARANTEE YOUR SAFETY.
REGISTRATION OF RIDERS AND AGREEMENT PURPOSES: In consideration of the payment of a fee and the signing of this agreement, I, the following listed individual and the parent or legal guardians thereof if a minor, do hereby voluntarily request and agree to participate in riding instruction as a student at this facility and that this student will either ride his/her own horse, or school horses provided by this facility for instructional purposes, today and on all future dates.

RIDER NAME _____ **AGE** (if under 21) _____
WEIGHT (over 240#) **YES** _____ **NO** _____ **HORSE RIDING EXPERIENCE** (check one below)
BEGINNER (under 10 hours) _____ **OVER 10 HOURS** _____ Does this rider have any physical and /or mental health conditions, problems, and or/disorders, which may affect his/her safety and ability to ride a horse? Yes _____ No _____. If yes, please describe here _____

AGREEMENT SCOPE AND TERRITORY AND DEFINITIONS: This agreement shall be legally binding upon me the registered student, or boarder and the parents or legal guardians thereof if a minor my heirs, estate, assigns, including all minor children and personal representatives, and it shall be interpreted according to the laws of the state and county of THIS FACILITY'S physical location. Any disputes by the rider shall be litigated in and venue shall be the county in which THIS FACILITY is physically located. If any clause, phrase, or word is in conflict with state law, then that single part is null and void. The term "HORSE" herein shall refer to all equine species. The term "HORSEBACK RIDING" herein shall refer to riding or otherwise handling of horses, ponies, mules, or donkeys, whether from the ground or mounted. The terms "STUDENT" and /or "RIDER" shall herein refer to any person who rides a horse mounted or otherwise handles or comes near a horse from the ground. The terms "I, "ME", "MY" shall herein refer to the above registered student rider, or boarder and the parents or legal guardians thereof if a minor.

ACTIVITY RISK CLASSIFICATION. .I UNDERSTAND THAT: Horseback riding is classified as RUGGED ADVENTURE RECREATIONAL SPORT ACTIVITY, and that there are numerous obvious and non-obvious inherent risks always present in such activity despite all safety precautions. According to NEISS (National Electronic Injury Surveillance Systems of the United States Consumer Products) horse activities rank 64th among the activities of people relative to injuries that result in a stay in U.S. hospitals. Related injuries can be severe requiring more hospital days and resulting in more lasting residual effects than injuries in other activities.

NATURE OF THIS FACILITIE'S SCHOOL HORSES...I UNDERSTAND THAT: THIS FACILITY chooses it's school horses for their calm dispositions and sound basic training as is required for use for STUDENT RIDERS, and THIS FACILITY follows a rigid safety program. Yet, no riding horse is a completely safe horse. Horses are 5 to 15 times larger, 20 to 40 times more powerful, and 3 to 4 times faster than a human. If a rider falls from horse to ground it will generally be at a distance of from 3 1/2 to 5 1/2 feet, and the impact may result in injury to the rider. Horseback riding is the only sport where one much smaller, weaker predator animal (human) tries to impose its will on, and become one unit of movement with another much larger, stronger prey animal with a mind of its own (horse) and each has a limited understanding of the other. If a horse is frightened or provoked it may divert from its training and act according to its natural survival instincts which may include, but are not limited to: Stopping short; Changing directions or speed at will; Shifting its weight; Bucking, Rearing, Kicking, Biting, or Running from what it perceives as danger.

RIDER RESPONSIBILITY...I UNDERSTAND: Upon mounting a horse and taking up the reins the rider is in primary control of the horse. The rider's safety largely depends upon his/her ability to carry out simple instructions, and his/her ability to remain balanced aboard a moving animal. I agree that the rider shall be responsible for his/her own safety, including that of an unborn child, if the rider is pregnant. Pregnant women should ride horses only under the advice of their physician. THIS FACILITY advises pregnant women no to ride horses.

CONDITIONS OF NATURE AND INSPECTION OF PREMISES...I UNDERSTAND THAT: THIS FACILITY is NOT responsible for total or partial acts, occurrences, or elements of nature that can scare a horse, cause it to fall, or react in some other unsafe way. SOME EXAMPLES ARE: Thunder, lightning, rain wind, wild and domestic animals, insects, reptiles, which may walk, run or fly near, or bite or sting a horse or person; and irregular footing on out of door groomed or wild land which is subject to constant change in condition according to weather, temperature, and natural and man-made changes in landscape. The rider and parent or legal guardian have inspected THIS FACILITY and are satisfied that all premise conditions are reasonably safe for rider's intended purpose, usage and presence upon THIS FACILITIE'S PREMISES.

SADDLE GIRTHS/NATURAL LOOSENING...I UNDERSTAND THAT: saddle girths (saddle fasteners around horse's belly) may loosen during a ride. If a rider notices this he/she must alert the riding instructor as quickly as possible so action can be taken to avoid slippage of saddle and a potential fall from the animal.

ACCIDENT/MEDICAL INSURANCE...I AGREE THAT: Should emergency medical treatment be required, I and/or my own accident/medical insurance company shall pay for all such incurred expenses. My accident/medical insurance company is _____ and my policy number is _____.

PROTECTIVE HEADGEAR WARNING...I AGREE THAT: I have been fully warned and advised by THIS FACILITY that I should purchase and wear protective headgear (equestrian riding helmet), and do understand that the wearing of such headgear while mounting, riding, dismounting and otherwise being around horses may prevent or reduce severity of some head injuries, and may even prevent death from happening as the result of a fall or other occurrence.

LIABILITY RELEAS...I AGREE: In consideration of THIS FACILITY, it's owners, agents, employees, officers, members, premises owners, affiliated organization and insurers from legal liability due to THIS FACILITIE'S ordinary negligence; and I do further agree that except in the event of THIS FACILITIE'S gross and willful negligence, I shall bring no claims, demands, actions and causes of action, and /or litigation, against THIS FACILITY and its associates as stated above in this clause, for any economic and no economic losses due to bodily injury, death, property damage, sustained by me and/or my minor child or legal ward in relation to the premises and operations of THIS FACILITY to include while riding, handling, or otherwise being near horses owned by or in the care, custody and control of THIS FACILITY.

ALL RIDERS AND PARENTS OR LEGAL GUARDIANS MUST SIGN BELOW AFTER READING THIS ENTIRE DOCUMENT:

SIGNER STATEMENT OF AWARENESS

I/WE THE UNDERSIGNED, HAVE READ AND DO UNDERSTAND THE FOREGOING AGREEMENT, WARNINGS, RELEASE AND ASSUMPTION OF RISK. I/WE FURTHER ATTEST THAT ALL FACTS RELATING TO THE APPLICANT'S PHYSICAL CONDITION, EXPERIENCE, & AGE ARE TRUE AND ACCURATE.

SIGNATURE OF RIDER (Spouses must sign for themselves) _____

SIGNATURE OF PARENT, GUARDIAN AND/OR SPOUSE #1 _____ FOR _____

SIGNATURE OF PARENT, GUARDIAN AND/OR SPOUSE #2 _____ FOR _____

ADDRESS IN FULL _____

PHONE _____ CELL _____

E-MAIL _____ DATE _____