

Results Riding School
Horsemanship and Summer Programs
Horse Riding Indemnity and Liability Release Form
Horseback Riding Can Be Dangerous
Serious Injury May Result From Your Participation In This Activity

By this agreement made and entered on (date) _____
By and between Parent/Legal Guardian (your name) _____
Who resides at (your address) _____

Hereinafter referred to as "I" and Janet Lloyd-Davis of Results Riding School or RRS, hereinafter referred to as "Results Riding School or RRS" www.resultsriding.com (408) 307-6438- Located at 395 Lena Ave. Gilroy, CA. 95020, just off Masten Ave. and 101 down the street from the Grass Farm.

It is hereby agreed to as follows:

1. **HAZARDOUS ACTIVITY:** I understand that horseback riding is a hazardous activity and that horses are unpredictable by nature; that when frightened or angry or under stress, a horse's natural instincts are to jump forward or sideways, to run away from danger at a trot, canter, or gallop, to kick, to buck, to rear up in front, or to bite; that horses are extremely powerful; and that if a rider falls to the ground, the fall distance will generally be more than 5 feet. I understand that these risks and voluntarily assume these risks and dangers for myself or on behalf of my child or legal ward. _____ **(Initial Here)**
2. **RIDING HELMETS:** I understand that I can better protect myself against head injuries by wearing protective equestrian head gear while mounting, riding, dismounting, grooming and being around horses. Results Riding School/RRS will provide helmets to all riders free of charge. I accept full responsibility for the increased risk of injury if I decide not to wear a helmet or not require my child or legal ward to wear a helmet. **HELMETS REQUIRED FOR ALL AGES UP TO 18 YRS OLD.**
_____ **(Initial Here)**
3. **LIABILITY RELEASE:** I understand that, except in the event of Results Riding Schools' wanton or willful negligence, I am responsible for bodily injury or property damage that I or my child or legal ward should sustain while riding a horse or pony provided by Results Riding School. I am also responsible for medical expenses or any other expense incurred as a result of such bodily injury or property damage. I am responsible for any time I, or my child or legal ward shall lose in employment or school or other activity. I hereby for myself, my heirs, administrators and assigns release and discharge Results Riding School/RRS and all of their officers and employees or volunteers from claims, demands, actions and causes of action for such injuries sustained to my person, or that of my child or legal ward and/or my property. _____ **(Initial Here)**
4. **INDEMNITY:** I agree to indemnify and pay any expenses, loss or damage that is incurred by Results Riding School/RRS and all of their officers, employees and volunteers arising out of my rental and riding, or my child or legal ward's rental and riding of a horse supplied by Results Riding School/RRS. _____ **(Initial Here)**
5. **INDEMNITY / LIABILITY RELEASE BY PARENT OR GAURDIAN OF MINOR CHILD OR LEGAL WARD:** In the knowledge that a parent by law can not waive the personal injury rights of other claims of a (their) minor child or legal ward, the undersigned parent or guardian of said minor child or legal ward agrees to indemnify Results Riding School/RRS, Leonard and Carmen Bettencourt of 395 Lena Ave. Gilroy, CA. 95020 and all their officers, employees and volunteers from any financial loss suffered as a result of any claim brought on behalf of said minor child or legal ward. Further, I agree not to bring any claim or other legal action against Results Riding School/RRS, Leonard and Carmen Bettencourt of 395 Lena Ave. Gilroy, CA. 95020 and all of their officers, employees or volunteers for personal injuries suffered by said minor alleging negligent acts or acts of omissions by Results Riding School/RRS and all of their officers, employees or volunteers. _____ **(Initial Here)**
6. **Safety clothing:**
I will supply long pants/denim jeans or horse riding pants and heeled safety boots or riding boots.
_____ **(Initial Here)**

7. I agree and understand that leaving my minor child in the full care of Janet Lloyd-Davis and Results Riding School as a drop-off arrangement, means that I am not physically present for horsemanship program/lesson activities.
_____ (Initial Here)
8. I am welcome to attend any or all sessions with my minor child. _____ (Initial Here)
9. I choose not to physically attend any portion or all horsemanship activities with my minor child.
_____ (Initial Here)
10. I agree to sign for Leonard and Carmen Bettencourt of 395 Lena Ave. Gilroy, CA. 95020 release/waiver.
_____ (Initial Here)

**DO NOT SIGN BELOW UNLESS YOU HAVE THOROUGHLY READ AND UNDERSTOOD
THE ENTIRE CONTENTS OF THIS RELEASE FORM**

Signature of Rider #1	Date	Signature of Rider # 2	Date
		Signature of Parent or Guardian	Date

Results Riding School Registration Form

Located at 395 Lena Ave. Gilroy, CA. 95020 (408) 307-6438

www.resultsriding.com

Deposit of \$50.00/nonrefundable: _____ **SUMMER HORSEMANSHIP CAMP**
 TO: Janet Lloyd-Davis/Home Address- Mail to: 6270 Valroy Dr. San Jose, CA. 95123
Camp Participation Dates: _____ Day of Week _____ Month

Student Information

Name: _____

Date Of Birth: _____ Age: _____

Parents: _____

 _ Legal Guardian/Ward:

Drop off and or Pick up person _____

Signature of Parent or legal guardian _____

Contact Information

Primary Contact Name: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Mailing Address: _____

 Secondary Contact Name: _____

Relation: _____

Mailing Address: _____

Home Phone: _____

Cell Phone: _____

Medical Information

Allergies: _____

Medications: _____

Physician Name: _____

Phone: _____

Address: _____
