Must fill form out **completely**!

**PRINT!** *Name:   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

 *Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

 *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

 *Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**Hold Harmless/Activity Release**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(the parent of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_),

have read and understand, and freely and voluntarily enter into this Hold Harmless/Activity Release Agreement with Autumn Ridge Acres (including owners Jeff and Gina Hill, and any assigned Barn manager(s) understanding that this agreement is a waiver of any and all liability(ies).

I understand the potential dangers that I could incur while involved in including, but not limited to, mounting, riding, walking, boarding, trailering, feeding, grooming, and/or while being a spectator, and/or recipient of instruction of such activity(ies).

I understand and recognize and warrant that this agreement is being voluntarily and intentionally signed and agreed to, and that in signing this agreement I know and understand that this agreement limits the liability of the facility, owners, and assigned manager(s) of any activity, whatsoever, involving an equine, including death, personal injury, and/or damage to property.

I am providing Autumn Ridge Acres with my current health insurance information:

**Insurance Company**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Policy Holder Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Further indication of not holding this facility, the owners, or assigned manager(s) liable for any kind of accident or injury, whatsoever, related to my being anywhere on the grounds of Autumn Ridge Acres including, but not limited to, the indoor/outdoor arena(s), run-in/stall area, bathroom, parking lot, round pen, or trails.

**Illinois Liability Act**: **WARNING** Under the Equine Activity Liability Act, each participant who engages in an equine activity expressly assumes the risks of engaging in and legal responsibility for injury, loss, or damage to person or property resulting from the risk of equine activities.

I have read this (to my child), I/we  understand, and agree to follow the rules as (**indicated by my initials**) that follow:

**Facility Rules**

\_\_\_\_\_We are open daily from 8 am to 10 pm.

\_\_\_\_\_Visitor/Guest riders...are only allowed here in the presence of a boarder as their guest.  It is the boarder’s responsibility to see that rules are followed by this guest.

 \_\_\_\_\_Visitor/Guest riders…please check in and sign papers prior to riding. Once your paperwork is filled out, it is good for a year.  If you do not have paperwork on file here DO NOT ride here until you do.

 \_\_\_\_\_Visitor/Guest…to ride your own horse in the arenas/on trails it cost $10 per rider. Place payment in a sealed envelope marked with your name and the date.  Place it in the office door slot prior to riding. (Envelopes and pens are located in the bathroom.)

\_\_\_\_\_Visitor/Guest can rent a horse from the BARN (to ride while boarder is riding) for a cost of $20, if arranged in advance.

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\_\_\_\_\_Clean up after yourself and your horse.  There are manure picks and wheelbarrows available for your convenience. This is an earth friendly facility.  Place your waste in the appropriately labeled can(s).

 \_\_\_\_\_Alcohol is not permitted on the premises.

 \_\_\_\_\_Smoking is only allowed in the designated area at the north side of the arena.  Extinguish your cigarette(s) in the sand-filled can. Do NOT throw butts on the ground.

 \_\_\_\_\_Park and drive on the gravel only.

 \_\_\_\_\_The washing facility is **only** for boarders

 \_\_\_\_\_Whatever you get out to use in the arena (jumps, poles, barrels etc…) put it back where you got it when you are finished.

 \_\_\_\_\_Please securely latch all gates, and doors that you enter and/or exit. Please do not leave the tack room open while riding. If you open/close the sliders you MUST latch them properly or don’t open them!

\_\_\_\_\_Share the arena with other riders.  If a lesson is going on, please use half of the arena.

 \_\_\_\_\_Be safe. Have a good ride!

I understand, and concur that this agreement goes into effect immediately as of the signing of this page and continues to be in effect for up to 1 year.   I agree to inform Autumn Ridge Acres of any change(s) in my health insurance coverage. I, the equine participant/parent, in signing this agreement, do hereby certify to the correctness of the information given, and specifically agree to be bound by the terms and conditions of this agreement.  I have read, understand, and agree to uphold the facility rules. Failure to do so may require me to vacate myself, and my belongings from the premises.

**equine participant signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                   \_\_\_\_\_\_\_\_\_\_\_\_

 date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                   \_\_\_\_\_\_\_\_\_\_\_\_

**parent of a minor signature** (if applicable)                          date