WESTERN DRESSAGE CLINIC E	ENTRY FORM:	
45 Min Session with Sandra L	indengerg. \$75	
ENTRY INFORMATION:		
Rider's Name:		-
Horse's Name:		
LevelBrief Riding Backround	l:	
myself, my heirs, executors, administrators, assign waive any and all rights, claims or causes of action Windy Knoll Farm/Fran Kehr, located at 32118 Old neirs, representatives, predecessors, successors a	WAIVER AND RELEASE OF LIABILITY for Windy K ing in horseback riding, (the "Activity"), and as consideration for the right to s, or personal representatives, knowingly and voluntarily enter into this wair of any kind whatsoever arising out of my participation in the Activity, and do Hempstead Rd, Magnolia, Texas 77355, their affiliates, managers, member and assigns, for any physical or psychological injury, including but not limited a direct result of my participation in the aforementioned Activity, including transfer	participate in the Activity, I hereby, for ver and release of liability and hereby hereby release and forever discharge rs, agents, attorneys, staff, volunteers, to illness, paralysis, death, damages,
	OREMENTIONED ACTIVITY AND I AM PARTICIPATING IN THE ACTIVIT S, BOTH KNOWN OR UNKNOWN TO ME, OF MY PARTICIPATION IN TH	
compensation or otherwise brought by me or anyor	noll Farm/Fran Kehr against any and all claims, suits or actions of any kine on my behalf, including attorney's fees and any related costs, if litigation are Knoll Farm/Fran Kehr incurs any of these types of expenses, I agree to rein	arises pursuant to any claims made by
	nd their directors, officers, volunteers, representatives and agents are not resecific event or activity on behalf of Windy Knoll Farm/Fran Kehr.	sponsible for errors, omissions, acts or
	R 87, CIVIL PRACTICES AND REMEDIES CODE), AN EQUINE PROFESS RTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT	
EXPRESSLY AGREE TO RELEASE AND DISCH, ATTORNEYS, STAFF, VOLUNTEERS, HEIRS, RE CAUSES OF ACTION AND I AGREE TO VOLUNT Windy Knoll Farm/Fran Kehr FOR PERSONAL II	READ THIS "WAIVER AND RELEASE" AND FULLY UNDERSTAND THAT ARGE Windy Knoll Farm/Fran Kehr AND ALL OF ITS AFFILIATES, MANAEPRESENTATIVES, PREDECESSORS, SUCCESSORS AND ASSIGNS, FITARILY GIVE UP OR WAIVE ANY RIGHT THAT I OTHERWISE HAVE TO NJURY OR PROPERTY DAMAGE.  Obhibit releases for negligence, this release is also for negligence on the particular and th	AGERS, MEMBERS, AGENTS, ROM ANY AND ALL CLAIMS OR BRING A LEGAL ACTION AGAINST
agents, and employees.	eatment, I agree to be financially responsible for any costs incurred as a res	•
	the age of 18 years or older, (or must be signed by parent or guard, t, that I fully understand its content and that this release cannot be modified only own free will.	
Participant's Name :	-	
Participant's Address:	Include CO	GGINS w/Entry & Check
Participants Phone/Email.	Checks pay	yable to Sandra Lindenberg
Participants Signature:	_/ Parent Signature if under 18 :	
MAIL ENTRY TO:		

SANDRA LINDENBERG WINDY KNOLL FARM 32118 OLD HEMPSTEAD RD MAGNOLIA, TX 77355