****

 **HEALING HOOF STEPS SAFETY GUIDELINES**

Welcome to Healing Hoof Steps! We are glad you are here. After reading the material, please sign where indicated showing that you understand and are in agreement with the policies and procedures of our organization.

 • The home located on the property is a private residence – no trespassing please.

 • Designated Healing Hoof Steps parking is located at the front of the property inside the security gate.

• Anyone riding or handling a horse on Healing Hoof Steps property must have a signed waiver on file. Waivers are available online or from the instructors.

• If you wish to observe the session, please sit at the tables and chairs located under the wonderful shade tree. Please keep the conversation levels down so there will be no distractions for the student.

• OPTION TO PARKING AND WAITING WHILE CLASS IS IN SESSION is permitted in parking area

• All riders must wear an ASTM approved helmets at all times while riding on the property.

• Under no circumstance is a child allowed to retrieve a horse in a turnout without adult supervision.

• Children under the age of 16 must be under the direct supervision of a parent or adult designated by a parent at all times while on Healing Hoof Steps property.

• For safety reasons, no one is allowed on the horse trail without permission from a staff member.

• Do not hand feed treats to horses without permission. Some horses, have allergies, such as corn.

**THANK YOU FOR YOUR COOPERATION IN MAKING HEALING HOOF STEPS A SAFE AND HAPPY FARM!**

I have read the preceding information and will agree to adhere to the safety practices and facility guidelines while on property with my family and/or clients.

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

Student Name/Signature

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

Parent/Guardian Name/Signature

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

Date