



Golden Empire Equestrians

**West Coast Equine Sports Therapy
and
Golden Empire Equestrians
present:**

Introduction to Driving

REGISTRATION FORM

Name _____
Address _____
City,State,Zip _____
Home Phone _____
Cell Phone _____
Email _____

Pre-Registration: \$25 per person _____

Includes lunch - circle choice:

- Ham & Cheese on ciabatta roll
- Turkey & Avocado on multigrain roll
- Pastrami & Swiss on ciabatta roll
- Roast Beef on ciabatta roll
- Turkey, Bacon, Provolone, Chipotle on ciabatta roll
- Veggie on multigrain roll
- Mixed Green Salad w/ Balsamic Vinaigrette
- Chicken Caesar Salad
- Chinese Chicken Salad w/ Sesame Soy Dressing

Non-Pre-Registered - \$25 at the door, no lunch included optional:

GEE Membership - \$20/year _____

Total Amount Enclosed (*checks payable to GEE*) _____

IF YOU ARE RECEIVING THIS FORM VIA EMAIL, PLEASE SIGN THE TWO RELEASES (WCEST & GEE) AND ENCLOSE WITH THIS REGISTRATION FORM.

- Registration Form
- Check
- Release - WCEST
- Release - GEE

MAIL TO:
Alyssa Mayo
19600 Kneebone Ct.
Penn Valley, CA 95946

**Saturday, July 8, 2017
9:00am - 2:00pm**

**West Coast Equine Sports Therapy
19600 Kneebone Ct.
Penn Valley, CA 95946**

Schedule:

- 9:00 Welcome & Registration**
- 9:15 Presentation:
The Fun & Diversity of Driving**
- 10:00 Driving Demos:
Minis
Competitive Driving
Pleasure Driving
Draft Horses**
- 11:00 Lunch**
- 11:30 Break into groups for
hands-on experiences:
rotate through stations every
half hour**
 - Ground Driving Minis
 - Draft Horses
(with wagon rides!)
 - How to Harness a Horse
 - Carriages & Harness
- 1:30 Finish - presenters will stay
available to answer questions**

GOLDEN EMPIRE EQUESTRIANS



Participant's Name: _____

If bringing a horse, complete the following:

Horse's Name: _____ breed: _____ sex: _____ age: _____

RELEASE OF LIABILITY

I acknowledge that horseback riding is a sport which carries inherent risks of injury and damage to me, my horse and property. I knowingly assume all risks of horseback riding, whether known or unknown, including, but not limited to, injuries, death or property damage from: mounting, dismounting, riding, walking, grooming, feeding, use of facilities or riding arena, falling off horse, riding without a riding helmet, or otherwise relating to my riding or otherwise use and control of, or lack thereof, my horse or any horse used by me.

I hereby release Golden Empire Equestrians, Inc. (the "Club") and all of its directors, officers, members, agents or any of their representatives or assigns (collectively, "Indemnitees") from any and all liability for any act of negligence or want of ordinary care on the part of Indemnitees.

In consideration of my participation in events organized or sponsored by the Club ("Club Events"), I hereby waive, release and discharge Indemnitees from any and all claims of liability for injury or damage to myself, my animals or my property arising out of any claims of liability for injury resulting from or occurring during my participation in, Club Events, which shall be binding upon my executors, heirs or assigns.

I expressly waive any rights I may have under California Civil Code Section 1542, which states that "A general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known by him, might have materially affected his settlement with the debtor."

I agree that I will indemnify and hold harmless Indemnitees against all claims, demands and causes of action, including court costs and actual attorneys' fees incurred, arising from any court proceedings or other causes of actions brought by or prosecuted for my benefit, in which this Release of Liability is upheld.

I acknowledge that I have read this Release of Liability and understand its contents.

Print name: _____ Phone: _____

Address: _____

Signature: _____ Date: _____

**MINORS DO NOT SIGN BELOW THIS LINE
PARENT OR LEGAL GUARDIAN MUST COMPLETE THIS SECTION**

The undersigned parent or guardian or the above participant in a Club event, in consideration of the minor's participation in the event, hereby agree that the terms and conditions of this Release of Liability shall be binding as to damage or injury to the minor participant, or any animals or property belonging to or under the control of the minor participant, resulting from or occurring during the Club Event.

Print name: _____

Signature: _____ Date: _____



WEST COAST EQUINE SPORTS THERAPY

General Release and Indemnity Agreement

(must be signed before working with horses)

I/we hereby indemnify and agree upon signing this release that as an owner, student, contestant, spectator, parent or rider, I/we the undersigned will not hold West Coast Equine Sports Therapy (WCEST), John or Cathi Mayo, or anyone connected with the operation of WCEST responsible for any accidents or injuries sustained by me, my stock, my employees, heirs, representatives or dependents.

I/we understand that interacting with horses can be dangerous, that injuries or death can happen and I accept the responsibilities of the dangers inherent to these animals. Signing this release indicates that the participant carries adequate medical insurance, as WCEST will assume no responsibility of liability.

Insurance certified riding helmets greatly reduce the risk of head injury to the participant. Helmets are recommended by WCEST. **If you do not wish to wear a safety helmet, or do not require your child to wear one,**

please sign here: _____

If the participant is under 18 years of age, a parent or guardian must sign indicating acceptance of responsibility.

(Please Print Clearly)

Date: _____

Participant's Name: _____

Participant's Signature (18 yrs. And older): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (day): _____ (eve.) _____

Email address: _____

Signature of parent/guardian: _____

MEDICAL RELEASE (for participants under 18 years of age)

In case of accidental injury, I give permission for _____
to be treated by a doctor or emergency room staff.

Doctor preferred: _____

Doctor's Phone: _____