

Circle T Trail Riders Inc. Riding Release Form

Name: _____

Address: _____

Phone: H _____ C _____

Person to call in an emergency: _____

I, the undersigned, have entered into an agreement with Circle T Trail Riders, Inc. for the purpose of trail riding.

I have inspected the premises upon which I will be riding and have been advised of the risks and dangers that may be involved with equine activities. I have been made aware of the uncontrollable and unanticipated situations that may arise during these equine activities. I assume the risks inherent in all horse related activities, including, but not limited to bodily injury and physical harm to horse, rider and/or spectator.

In consideration, therefore, of the privilege of riding with Circle T Trail Riders Inc., I agree to hold Circle T Trail Riders, Inc., its members, partners, employees, agents, lessors and/or property owners harmless from any liability or responsibility for damage or injury to myself, my horse(s) and property arising out of my activities and/or actions while riding with Circle T Trail Riders, Inc.

I have been advised to wear an approved helmet. I have also been advised to wear safe, comfortable clothing and footwear to prevent accidents.

I certify that if I am under the age of 18 years, I have permission of my parents or guardian to participate in equestrian activities, and that they have full knowledge thereof.

Parent/Guardian: _____ Date _____

Rider/Adult: _____ Date _____