



Serenity Acres Family Ranch Equine Assisted Learning Center
Release and Waiver of Liability

PARTICIPATION FORM

Name of Participant _____

SAFETY ISSUE ACKNOWLEDGEMENT AND COMMITMENT: Prior to my own or my child's participation in recreational activities, use of equipment, facilities, horses and other premises offered by Serenity Acres Family Ranch. I acknowledge and understand that there are inherent risks, dangers and perils connected with the use of horses in general as well as in an EAL controlled environment, including injury or even death.

Under these conditions, I realize Serenity Acres Family Ranch's efforts to thoroughly inform and continually maintain safety for all concerned. I will faithfully adhere to all safety instructions and recommendations provided by Serenity Acres Family Ranch whether oral or written while on Serenity Acres Family Ranch's premises.

By signing this Participation Release, I expressly warrant that the participant named above or I, if I am the participant, am capable of withstanding both the physical and mental demands of the activities discussed above. I also expressly assume all risks of the participant or me participating in the activities. I further release Serenity Acres Family Ranch from any claim that my children may have or that I may have against them as a result of injury, illness or death incurred during the course of participation in these activities. This release of liability shall include (without limitation) any claims of negligence or breach of warranty. This release of liability is also intended to cover all claims that members of the participant's or my family or estate, heirs, representatives, or assigns, may have against Serenity Acres Family Ranch.

I will further agree to use and care for any and all Serenity Acres Family Ranch's Equine Assisted Learning animals to the best of my ability.

Date _____

Signature of Participant or legal guardian if participant is under 18 years of age

IN CONSIDERATION of Serenity Acres Family Ranch permitting me to participate in the Equine-Assisted Learning course, I FURTHER GIVE MY PERMISSION to Serenity Acres Family Ranch, while attending the Equine-Assisted Learning Program, to take and use photographs at their discretion in as much as the reproductions are in good taste and respectfully displayed.

Date _____

Signature of Participant or legal guardian if participant is under 18 years of age