

Mythical Meadows

Equestrian Center

13801 218th St. E.

Graham, WA 98338

MythicalMeadows@gmail.com



IDENTIFICATION AND RELEASE OF LIABILITY

Name: _____ Age (if under 18) _____

EACH OF THE UNDERSIGNED, AGREES, WARRANTS AND COVENANTS:

I/we recognize that horseback riding on horses and ponies, can be dangerous for many reasons, including, but not limited to: inexperience of the rider, disposition, temperament and health of the rider; disposition, temperament and health of the animal, terrain and terrain irregularities, climatic conditions, unanticipated equipment failure or malfunction, and conduct of other persons present, etc.

I am the lawful parent / guardian of the above named child/children and am authorized to sign this identification and release on the behalf of each such child.

I am signing on my own behalf

In consideration of Mythical Meadows Equestrian Center and/or Steve and Connie Medeiros providing ponies and or horse rides, camps, and or other services, and with the exclusive exception of Injury or damage intentionally and purposefully inflicted by an employee or owner of Mythical Meadows Equestrian Center, I hereby release, for myself and above child named, and I agree and covenant, for myself, to HOLD HARMLESS, forever, Mythical Meadows Equestrian Center, it's employees, directors, volunteers and assigns FROM ANY AND ALL CLAIMS that hereafter acquire, or that any of the above named child/children may have or hereafter acquire arising from or related to participation in pony or horse rides, lessons, day camps, overnight camps, family camps, Mom's camps, badge programs, 4-H events, children's birthday parties, company picnics, or any other horse related activity at Mythical Meadows Equestrian Center, or presence on the premises of Mythical Meadows Equestrian Center no matter when, how, by whom, or where such claim is presented.

:::::> Consent for presence on the premises of Mythical Meadows Equestrian Center is strictly conditioned upon this identification and release of liability being properly and fully executed.

****THIS IS A CONTRACT. PLEASE READ CAREFULLY BEFORE SIGNING!**

(Signature of of Adult or Parent/Guardian)

(Printed Name of Adult or Parent/Guardian)

(Date)