Silver Glen Stables, Inc.

Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement

BY SIGNING THIS AGREEMENT, YOU ARE GIVING UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO RECOVER DAMAGES IN CASE OF INJURY, DEATH, OR PROPERTY DAMAGE.

READ THIS AGREEMENT CAREFULLY BEFORE SIGNING IT. YOUR SIGNATURE INDICATES YOUR UNDERSTANDING OF AND AGREEMENT TO ITS TERMS.

PARTICIPANT:	PHONE:
ADDRESS:	CITY & ZIP:
On behalf of myself, my personal representatives, heir	rs, next-of-kin, spouse, and assigns, I HEREBY:
	ous activity and involves RISKS that may cause SERIOUS of the unpredictable nature and irrational behavior of horses
	TO SUE Silver Glen Stables, Inc./Craig Van Kirk/Linda Var or any loss, liability, damage, or cost whatsoever arising out on th) to my person or property.
	ich Facility Owners are or may be negligent in connection with nited to training or selecting horses, maintenance, care, fit of skills or leading and supervising riders.
	LESS the Facility Owners from and against any loss, liability any way connected with either my use of the horse and any omissions of wranglers or other employees or agents.
indemnity agreement is governed by the State of C permitted by California law, and that in the event any	oing release and waiver of liability, assumption of risk, and alifornia and is intended to be as broad and inclusive as is portion of this Agreement is determined to be invalid, illegal ility of the balance of the Agreement shall not be affected or ree and effect.
	agree that if a lawsuit is filed against the Facility Owners for Undersigned will pay all attorney's fees and costs incurred by
I ACKNOWLEDGE THAT I HAVE READ THIS AND UNDERSTAND ITS CONTENTS.	RELEASE AND WAIVER OF LIABILITY AND KNOW
(Minors <u>do not</u> sign this form. Parent or Legal Gua	ardian <u>must</u> sign and date.)
Date Signatur	
Date Signatur	e
If applicable, name of Parent/Guardian:	
Address of Parent/Guardian:	

City

Zip