



EQUINE RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK,
AND INDEMNITY AGREEMENT

Name: _____ Address _____
Telephone: _____ I hereby enter into this agreement in consideration of
my / ability and permission to ride OR use any Horse owned by *Alexa Rodriguez owner of
School Of Horse Psychology.*

IMPORTANT NOTICE 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, ARISING OUT OF YOUR RIDING OR USE OF THE
OWNER'S HORSE AND/OR PARTICIPATION IN EQUINE ACTIVITIES AT THE PROPERTY
OF Saundra & Herb Hennigan 7327 Ally Gold Way Shingletown CA 96088, INCLUDING
INJURY, DEATH, OR PROPERTY DAMAGE ARISING OUT OF THE NEGLIGENCE OF YOU
OR Alexa Rodriguez and Saundra & Herb Hennigan. READ THIS AGREEMENT CAREFULLY
BEFORE SIGNING IT. YOUR SIGNATURE INDICATES YOUR UNDERSTANDING OF AND
AGREEMENT TO ITS TERMS. By signing this form, I hereby acknowledge on behalf of myself
that I have familiarized myself with the activities that I will be allowed to participate in, and that I
do hereby acknowledge and agree that I will participate in these activities without restriction or
limitation. I recognize the inherent risks involved in riding and working with horses, including but
not limited to: Bites, kicks, abrasions or contusions from horses. Being thrown or bucked off by
horses. Scratches or other injury from stalls or enclosures. Scratches or other injury from
grooming tools and other equine equipment and tack. Allergic reactions to animals, hay, or
other allergens. Tripping in holes or on materials or equipment. (Initial) _____ CONTINUED
ON PAGE 2 Page 2 Slipping, falling, or otherwise being injured in the barn, in stalls, or on the
grounds, which can be slippery, muddy, wet, or contain or present other hazards. I hereby
specifically forever waive and release Alexa Rodriguez and Saundra & Herb Hennigan and its
principals and agents from any liability for injury arising out of the inherent risks from riding,
working or participating in a stable environment and/or with horses, as well as from the active
negligence of Alexa Rodriguez and Saundra & Herb Hennigan, its principals and agents. (Initial)
_____ By signing this agreement I hereby acknowledge that although there may be

supervision during my time spent at Alexa Rodriguez and Saundra & Herb Hennigan, property there will not be a nurse on the premises Alexa Rodriguez and Saundra & Herb Hennigan and its principals and agents bear no responsibility for my health or medical care. I agree to indemnify, save and hold harmless Alexa Rodriguez and Saundra & Herb Hennigan and its principals and agents from and against any loss, liability, damage, attorneys' fees, or costs that they may incur arising out of or in any way connected with either my presence or participation at Alexa Rodriguez and Saundra & Herb Hennigan or any acts or omissions of Alexa Rodriguez and Saundra & Herb Hennigan principals or agents. By signing this Agreement, and by initialing the paragraph below, I hereby acknowledge my complete understanding, agreement and consent to my presence and/or participation in the activities at Alexa Rodriguez and Saundra & Herb Hennigan without restriction, without liability to Alexa Rodriguez and Saundra & Herb Hennigan its principals or agents, and with full knowledge and understanding of the disclosures, waivers, and releases herein. CONTINUED ON PAGE 3 (Initial) _____ Page 3 If I am present at and participate in the activities of Alexa Rodriguez and Saundra & Herb Hennigan I do so at my own risk, and I hereby acknowledge and agree that Alexa Rodriguez and Saundra & Herb Hennigan and/or any of its principals and agents shall bear no responsibility or risk associated with injuries that could arise from my presence or participation at Alexa Rodriguez and Saundra & Herb Hennigan

Name: _____ Date: _____

Participant's Signature: _____