



Release & Hold Harmless Agreement

Whereas, the UNDERSIGNED acknowledges & assumes the inherent & unavoidable risks & dangers involved in riding and working around horses, which risks include but not limited to bodily injury, physical harm & damage to horse, rider, spectators, visitors, pets, vehicles & trailers from using, riding or being in close proximity to horses.

IN CONSIDERATION, therefore, for the privilege of visiting, boarding, using tack, driving your vehicles on these premises, riding, taking riding lessons, trail riding, driving, riding &/or working around horses at Dream Ridge Stables LLC, located at 20500 & 20524 S. Ridge Rd. Oregon City, Oregon 97045 and extending to any other property and land owned by other parties on which Dream Ridge Stables activities might be conducted on; the undersigned does hereby agree to hold harmless and indemnify Dream Ridge Stables LLC, Karen Brauer, other land owners, other horse owners, anybody working or helping at the stables and anybody who leases or borrows their horses & equipment to Dream Ridge Stables; and further releases them from any & all liability or responsibility related to any accident, damage, injury or illness to the undersigned or to any family member, guest or spectator accompanying them and/or to any horse or vehicle owned, borrowed, accompanying the undersigned.

Equine Helmets are required for Everyone taking a lesson & always by anyone under 18 years old while working with horses at Dream Ridge Stables

In addition, the undersigned acknowledges to have read & understand the Statute Limiting Liability for horse Activities in the State of Oregon signs posted around the barn at the entrances to the stable property.

Date _____

(this is the date on which this release was filled out; this agreement is not only for today but for all visits to Dream Ridge Stables LLC in the future)

Reason for your visit _____

Print Adults name who ACKNOWLEDGES HEREBY THAT THEY HAVE FULL AUTHORIZATION & RIGHTS FOR AND ARE TAKING COMPLETE LEGAL RESPONSIBILITY FOR THEMSELVES & THE LISTED MINORS BELOW:

Adult's name: _____

Date of Birth: _____ Phone number: _____

Full home address: _____

City: _____ State: _____ Zip: _____

Emergency contact person & phone #: _____

<p>Type of Photo ID used to verify:</p> <p>_____</p> <p>Representative of D.R.S. Name</p> <p>_____</p>
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Signature of adult: _____

Print Name of any persons under 18 for whom you (named above) are acknowledging that you have the legal right to and are taking complete responsibility for as a Parent or Guardian and agree to supervise at all times while visiting Dream Ridges Stables LLC&/or riding horses at Dream Ridge Stables LLC.

Minor: _____ Date of Birth: _____

Minor: _____ Date of Birth: _____

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Do you wish to be added to our Private Mailing list of upcoming events at Dream Ridge Stables

No: _____ Yes: _____ Email address: _____