



THIS DOCUMENT WILL AFFECT YOUR LEGAL RIGHTS AND LIABILITIES

PLEASE READ CAREFULLY

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone: Home: \_\_\_\_\_ Business: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
In Emergency Call: \_\_\_\_\_  
Phone: Home: \_\_\_\_\_ Business: \_\_\_\_\_

I, \_\_\_\_\_ request permission to participate in horseback riding and other equestrian related activities organized by Horizon Stables.

I fully understand that horseback riding, handling and grooming of horses and other stable activities are very dangerous.

**I also understand that while participating in this high-risk sport, it is mandatory that I wear a helmet with a fixed harness while mounted.**

**By not wearing proper safety headgear, I fully accept all responsibilities of my actions.**

I accept and assume all risk of injury (including death) to me or my property.

In exchange for being permitted to participate in these activities, for myself, my heirs, guardians, and legal representatives, I release and agree not to make or bring any claims of any kind against Horizon Stables, or officials, servants, employees, representatives, officers, and directors for damage to my property, arising out of my participation in these dangerous horseback riding or related activities.

Dated: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
WITNESS

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
PARENTS SIGNATURE (if under 18)

**Horizon Stables**  
Owners: Jason Neill & John Neill  
Sales - Breeding - Training – Shipping