

FIESTA FARM
250 McNabb Road
Elkview, WV 25071
304-965-9000

Name	Birth Date	Grade	
Address	City	State	Zip code
Telephone	Emergency Name and Telephone Number		
Physical, medical or other limitations			
Riding experience		VR Level	

WARNING: Under West Virginia Law, it is recognized that equestrian activities are hazardous to participants, regardless of all feasible safety measures which can be taken.

Each participant in an equestrian activity expressly assumes the risk and legal responsibility for any injury, loss or damage to person or property which results from participation in an equestrian activity. Each participant shall have the sole individual responsibility for knowing the range of his or her own ability to manage, care for, and control a particular horse or perform a particular equestrian activity, to maintain reasonable control of the particular horse or perform a particular equestrian activity, to maintain reasonable control of the particular horse or horses at all times while participating in an equestrian activity, to heed all posted warnings, to perform equestrian activities only in an area or in facilities designated by the horseman and to refrain from acting in a manner which may cause or contribute to the injury of anyone. If while actually riding in an equestrian event, ant participant collides with any object or person, except an obviously intoxicated person of whom the horseman is aware, or if the participant falls from the horse or from a horse-drawn conveyance, the responsibility for such collision or fall shall be solely that of the participant or participants involved and not that of the horseman.

A participant involved in an accident shall not depart from the area of the facility where the equestrian activity took place without leaving personal identification, including name and address, or without notifying the proper authorities, or without obtaining assistance when that person knows or reasonably should know that any other person involved in the accident is in need of medical or other assistance.

WAIVER: I, the undersigned, realize that there is risk of bodily injury while participating in any sport. I understand that a horse can never be entirely predictable. I am aware that the sheer size and the weight of the animal as large as a horse makes working around them a particularly risky sport to choose. As in any sport I choose to learn, I realize that it is my responsibility to learn safe practices within the sport and follow the directions and heed cautions whenever I participate in that sport. I am prepared now, and in the future, to accept responsibility for all the risk of personal injury or death that is possible as I learn to handle and ride a horse. I would actively pursue horseback riding lessons elsewhere if I did not receive instruction here. I understand that I am waiving all my rights to a lawsuit resulting from any act, including but not limited to, negligence on the part of the instructor, the owners, or their employees, trustees or representatives, that results in my own injury or death. I also request that my heirs, representatives and dependants refrain from bringing forth a lawsuit on my behalf, or for themselves, for I choose to assume responsibility for my risk in this sport. I authorize the instructor to summon professional emergency medical transportation for the purpose of transporting me to a medical facility in the event of injury.

Name	Date
Name	
Date	
<i>Parent(s), please sign and print names (Guardian's signature required if under 18)</i>	