

**INDEMNITY**

Have you any physical/medical disabilities?

Yes  ..... No

You have a duty to disclose any disability where horse riding could cause discomfort or relapse. An act of non-disclosure will be deemed to be fraudulent and you could be liable for prosecution.

Do you own a Helmet? Yes No

Do you own horse riding boots? Yes No

Have you ever Fallen off? Yes No

What's your riding ability? Experienced Average Beginner

How many times have you ridden? Less than 10 More than 10 A Great Deal

Do you agree that there are no fees being charged for this ride? Yes No

**RELEASE AND ASSUMPTION OF RISK (Parent or legal guardian must sign for all persons under 18)**

Date..... Signature.....

In consideration of, the right to participate in the horse ride, I have and do hereby assume all risks associated with the horse ride and will hold Oatleigh and occupants and associates free from any and all liability, causes of action, debt, claims and demands of every kind and nature what so ever, which I now have or may arise out of or in connection with my participation in the horse ride. The terms hereof shall serve as a release and assumption of risk for my heirs, executors and administrators and for all members of my family including any minors accompanying me. This document always remains the property of Oatleigh and occupants.

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