



Spring Valley Lake Association
13325 Spring Valley Parkway
7001 SVL Box
Spring Valley Lake, CA 92395-5107

SPRING VALLEY LAKE EQUESTRIAN CENTER LIABILITY RELEASE

NAME _____ DATE _____

ADDRESS _____

HOME PHONE _____ CELL PHONE _____

EMERGENCY CONTACT _____ PHONE _____

In consideration of the use of property and premises of Spring Valley Lake Equestrian Center, including but not limited to any horses and/or equipment which I may rent or use, I hereby agree to assume all risk of injury to myself in connection with such use or occupancy of such premises and property, and I further assume all responsibility for any and all damage to or loss of property of my own which may occur in connection with such use or occupancy.

I further agree to bear all medical fees and costs in connection with my use of equipment and animals and/or the occupancy of such premises use and property. I understand that the activities which I will engage in at Spring Valley Lake Equestrian Center involve potentially dangerous animals and that the equestrianism is a hazardous sport which involves ever-present risk of injury and property damage. I assume completed and full-related responsibility for such activities and my use of the Spring Valley Lake Equestrian Center.

I understand that by signing this document, I am hereby waiving all of my rights to make claims against Spring Valley Lake Equestrian Center and Spring Valley Lake Association, and their employees, staff, agents and representatives in the event that I suffer any damages, injury or death while at the Spring Valley Lake Equestrian Center.

The undersigned, or the undersigned's parent/guardian, if appropriate, hereby agrees to indemnify, hold harmless, and defend the Spring Valley Lake Equestrian Center and/or Spring Valley Lake Association, and their employees, staffs, agents and representatives costs, related to my use of the Spring Valley Lake Equestrian Center, all animals, and/or equipment.

I have read the four (4) paragraphs above. I understand them and I agree to their terms without reservations.

RIDER'S SIGNATURE _____ DATE _____
(Or name if less than 18)

If the rider is under 18 years of age, parent or guardian must sign below.

I/We the parent(s) or guardian(s) of the minor rider named above, have read the first five (5) paragraphs above and understand them and agree to their terms without reservation. I/We further agree that in the event my/our child or ward should hereafter make any claim for injury, damage or loss against Spring Valley Lake Equestrian Center and/or Spring Valley Lake Association, their employees, staff, agents or representatives, I/We shall defend, indemnify, and hold harmless for any and all claimed or real damages, verdicts, judgments, expenses, costs, and attorneys' fees and cost which may be rendered, or which they may incur as a result of said claim against them.

RIDER'S PARENT/GUARDIAN SIGNATURE _____ DATE _____