

GOLD CREEK EQUESTRIAN CENTER

16528 148th Ave NE
Woodinville, WA 98072

LIABILITY RELEASE AND ACKNOWLEDGMENT FORM

A liability release form must be signed by all riders prior to riding at Gold Creek Equestrian Center.

The undersigned rider assumes the unavoidable risks inherent in all horse related activities, including, but not limited to bodily and physical harm to horse, rider, and spectator. In consideration for the privilege of riding and/or working around horses at Gold Creek Equestrian Center, rider agrees to hold harmless and indemnify said Stable, further release them from any liability or responsibility for accident, damage, injury, illness, or death to the rider, or any family member or friend accompanying the rider on the premises.

If emergency treatment is needed, Gold Creek will attempt to contact the emergency person listed, but in the event no one can be reached, Gold Creek has the authority to secure emergency care for injured riders. The injured rider is responsible to pay all costs related to this care. Gold Creek Equestrian Center is authorized as rider's agent to arrange billing to rider (parent if rider is under 18 years of age).

Riding helmets and boots with heels must be worn at all times.

Lessons are one hour in length, including tacking up.

Lesson fees must be paid in advance.

Lessons for which notice of cancellation occurs more than 48 hours in advance will be allowed to schedule a makeup lesson. All makeup lessons must occur within the same session that the missed lesson occurred. Makeup lessons will be scheduled first into any open time slots with your regular instructor. If that is not possible, you will be scheduled with one of our other instructors. Make-up lessons are scheduled only to the extent that we have lesson openings. In some cases, you may not be able to reschedule a make-up lesson, even when adequate notice is given. **"No Shows" and cancellations with less than 48 hour notice are not eligible for makeup lessons.**

I/we have read, understand and agree to the above guidelines/conditions.

	_____ Date	
_____ Rider Name (Please Print)	_____ Parent/Guardian (if under 18)	
_____ Rider Signature	_____ Parent Signature	
_____ (email address)	_____ Home Phone	_____ Cell Phone
_____ Emergency Contact	_____ Phone Number	
_____ Physician Name	_____ Phone Number	