

Hope Retreat Ranch

Equine Assisted Therapy * Equine Education * Horsemanship *

2320 S. Sandwood Ave. & 16556 SE 20th St. Choctaw, Ok ,

ONSITE / OFFSITE RELEASE

HR Ranch,

Equine Assisted Therapeutic Riding / Equine Education / Ranch work and other activities

I, _____, HEREBY ACKNOWLEDGE that I have voluntarily applied to participate in instruction and training, care, handling, riding of horses, and other activities with HR Ranch, such activities to take place on the premises at 2320 S. Sandwood Ave. & 16556 SE 20th St. Choctaw, Ok , owned by MD713 LLC, and leased to HR Ranch, Sponsor and Sponsors.

I AM AWARE THAT ACTIVITIES AT HR RANCH INVOLVING, BUT NOT LIMITED TO HORSES, CAN BE INHERENTLY DANGEROUS AND HAZARDOUS AND I AM VOLUNARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED AND HEREBY AGREE TO ACCEPT ANY AND ALL RISKS OF INJURY OR DEATH. IN CONSIDERATION for being permitted to participate in said instruction and training, I HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE HR Ranch, each and every agent board member, volunteer, or rider thereof, and the Sponsor or Sponsors associated, all for the purposes herein referred to as Releasees, from all liability to myself, my legal representatives, distributes, guardians, assigns, heirs, and next of kin all for purposes herein referred to as "Releasors"; for injury, death or damage resulting from my participation in said instruction, training, or any ranch activity as a result of the negligence of Releasees or any employee, servant, agent or contractor of Releasees. I FURTHER RELEASE AND DISCHARGE Releasees from all liability to Releasors for injury, death or damage resulting from my participation in said instruction and training as a result of the negligence of any other party or parties in attendance. In addition, I HEREBY RELEASE AND DISCHARGE Releasees from all actions, claims or demands Releasee or now have or may have for injury, death, or damage resulting from my participation in such activities. I HEREBY AGREE TO INDEMNITY AND SAVE AND HOLD HARMLESS releases and each of them from loss, liability, damage, or cost that they, or any of them, may incur due to my participation in said instruction, training, or ranch activity. I HEREBY ASSUME FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE due to the negligence of Releasees or any of them or, servant, agent, or contractor of Releasees resulting from my said instruction and training. **I REALIZE that there are inherent risks involved in equine activities, and that it is the propensity of an equine to behave in dangerous ways which may result in the injury of the participant and the inability to predict and equine's reaction to sound, movements, objects, persons or animals and hazards of surface or subsurface conditions.** The undersigned assumes the unavoidable risks inherent to all horse-related activities including to but not limited to bodily injury and physical harm to horse, rider, and spectator, including any horse owned by the undersigned, or horse owned by HR Ranch, or any horse used by HR Ranch, or to any family member or spectator accompanying the undersigned on the premises. **I HAVE CAREFULLY READ THIS RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND HR RANCH AND I SIGN IT OF MY OWN FREE WILL** and further agree that on oral representations, statements or inducements apart from the foregoing written agreement have been made. **I HAVE READ THIS DOCUMENT. I UNDERSTAND IT IS A RELEASE OF ALL CLAIMS. I UNDERSTAND THAT I ASSUME ALL RISK INHERENT IN ACTIVITIES WITH or WITHOUT HORSES. I VOLUNTARILY SIGN MY NAME OR MY MINOR CHILD'S NAME EVIDENCING ACCEPTANCE OF THE ABOVE PROVISIONS.**

Participants Names

_____ Date of Birth _____
_____ Date of Birth _____
_____ Date of Birth _____
_____ Date of Birth _____

Address _____ Email _____

Signature of Applicant _____ Date _____

Signature of Guardian for Minor _____ Date _____

Witness of Applicant/Guardian Signature _____ Date _____