

LOCKWOOD PARK AND TRAILSIDE EQUESTRIAN CENTRE HORSEBACK RIDING PERMISSION FORM

IMPORTANT INFORMATION

The Rockford Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Rockford Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for this program/activity must recognize that there is an inherent risk of injury when choosing to participate in recreational activities/programs. You are solely responsible for determining if you or your minor child/ward are physically fit and/or skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or has recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

WARNING OF RISK

Equine activities engage the physical, mental and emotional resources of each participant. However, despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury. Understandably, not all hazards and dangers associated with equine activities can be foreseen. Certain inherent risks include the propensity of an equine to behave in dangerous ways that may result in injury to the participant, including, but not limited to the inability to predict an equine's reaction to sound, movements, objects, persons, or animals and actions by the equine due to fright, anger, stress, insect bites or natural reactions such as bucking, jumping sideways, forward or backwards, kicking, and biting. Other risks include the hazards associated with surface or subsurface conditions, acts of God, inclement weather, slipping, falling, insect bites, premises defects, equipment failure, failure in instruction/supervision, and all other circumstances inherent in equine activities and recreational activities. In this regard, it must be recognized that it is impossible for the Rockford Park District to guarantee absolute safety.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in this program/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program/activity (including transportation services/vehicle operation, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in the program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program/activity against the Rockford Park District, including its officials, agents, volunteers and employees (hereinafter collectively referred to as "District").

I understand that ALL riders must be 8 years old or older (children in Horse Camp or lessons can be 6 years old), and that all persons participating in a Lockwood Park and Trailside Equestrian Centre horse program will be required to wear an ASTM/SEI approved helmet (exception: pony ring).

I do hereby fully release and forever discharge the District from any and all claims for injuries, damages, or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with this program/activity.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, my on-line facsimile signature shall substitute for and have the same legal effect as an original form signature.

In the event of an emergency, I authorize officials of the Rockford Park District to secure from any licensed hospital, physician, and/or medical personnel any treatment deemed necessary for my or my minor child/ward's immediate care, and agree that I will be responsible for payment of any and all medical services rendered.

Participant's Name (Please Print)

Participant or Parent/Guardian's Signature (18 years or older or Parent/Guardian)

Date

PARTICIPATION WILL BE DENIED if the signature of parent/guardian and date are not on this waiver.

Phone Number (In case of emergency during the lesson time - OR - in case of cancellation.)