

Allison Acres ~ Registration Form and
Release of Liability for Riders and/or Handlers
13512 Alta Mesa Road ~ Galt, CA 95632 ~ 209/748-2658

Rider's Full Name	
Additional Rider from Same Family	
Additional Rider from Same Family	
Street Address Where You Reside	
Mailing Address, if different	
City, State, Zip	
Phone Number (home)	
Phone Number (emergency contact)	
Rider's Parent's Name, if Minor	

I the undersigned do hereby release from liability and hold harmless all family members who live at the above address and operate the business entitled Allison Acres (this would include Lyle Long, Pat Long, Cindi Scoleri, Joe Scoleri, Allison Partington, Stephanie Knesovich) and their heirs in the event anything happens to me, my dependents, or my property either while I'm working with horses at Allison Acres, or when I'm working with or riding horses that are owned by Allison Acres at other locations. I understand that handling and riding horses is inherently dangerous, and I am willingly taking the risk or allowing my child to take the risk. I know that I or my child may be hurt, kicked, bitten, struck, may fall off, be seriously injured or maybe even killed during interaction with horses. None of the horses owned by Allison Acres that I or my child would be allowed to handle are known to do anything that might hurt a person, but horses are living creatures who can be unpredictable. I understand and accept these potential injuries to self and/or property. **This release does not excuse Allison Acres' owners or staff from their liability if they are found to have acted with gross negligence.**

Please check the appropriate boxes below:

- I am riding/handling my own horse or a horse not owned by Allison Acres.**
- I am riding/handling a horse belonging to Allison Acres.**

All riders under the age of 18 must wear an approved riding helmet. We can provide the helmet.

For riders 18 and over:

- I was offered a helmet and I accepted (or I will wear my own helmet.)**
- I was offered a helmet and I declined.**

Signature of Rider

Date

Signature of Parent if Rider is a Minor

Date

I acknowledge getting a copy of this document. _____ (initial here)

Please let us know how you found out about our facility: