



Release and Hold Harmless Agreement

NAME: _____ DOB: _____

ADDRESS: _____

CITY/STATE: _____ ZIP: _____

HOME PHONE: _____ Email Address: _____

ACKNOWLEDGEMENT OF RISK

I, _____, the undersigned have read and understand, and freely and voluntarily enter into this Release and Hold Harmless Agreement with Horses Healing Hearts, Inc., and its agents and employees, Melissa and Mike Austin, Alex Wang, Leonids LLC, and its agents and employees, Michele and Jon Ulrech, Michele Ulrech Boarding and Training, and its agents and employees, volunteers, clients, and all people present and/or involved with the property and horsemanship, riding programs, or other activities located at: 7101 Camino Tassajara, Pleasanton, CA. I understand that this Release and Hold Harmless Agreement is a waiver of any and all liability (ies).

I understand the potential dangers that I could incur in mounting, riding, walking, boarding, feeding said horse(s); including, but not limited to, any interactions with other horses, dogs, or wild animals. I am aware that horse activities and the rehabilitation of rescued horses and riding involves many inherent dangers, risks and hazards; including but not limited to bodily injury and physical harm to the rider, groomer, leader, handler, photographer, spectator, helper and horse. Understanding those risks I freely and fully assume all such risks, dangers, and hazards and the possibility of personal injury, death, property damage or loss resulting from such risks, dangers and hazards. I also assume the above risks, dangers, hazards and possibilities for my minor child(ren) and wards in my care.

I HEREBY AGREE AS FOLLOWS:

1. TO ASSUME AND ACCEPT ALL RISKS, DANGERS AND HAZARDS in connection with my use or my minor child(ren)'s and ward's use of the facilities.
2. TO RELEASE Horses Healing Hearts, Inc., and its agents and employees, Melissa and Mike Austin, Alex Wang, Leonids LLC, and its agents and employees, Michele and Jon Ulrech, Michele Ulrech Boarding and Training, and its agents and employees, volunteers, clients, and all people present and/or involved with the property and horsemanship, riding programs, or other activities located at: 7101 Camino Tassajara, Pleasanton, CA, from any and all liability, rights of action or causes of action arising out of contract, tort or otherwise, for any loss, damage, injury or expense that I, my minor child(ren), or my ward(s) may incur as a result of use of the facilities due to any cause whatsoever.
3. TO WAIVE ANY AND ALL CLAIMS that I may have against, Horses Healing Hearts, Inc., and its agents and employees, Melissa and Mike Austin, Alex Wang, Leonids LLC, and its agents and employees, Michele and Jon Ulrech, Michele Ulrech Boarding and Training, and its agents and employees, volunteers, clients, and all people present and/or involved with the property and horsemanship, riding programs, or other activities located at: 7101 Camino Tassajara, Pleasanton, CA, from any and all liability, rights of action or causes of action arising out of contract, tort or otherwise, for any loss, damage, injury or expense that I, my minor child(ren), or my ward(s) may incur as a result of use of the facilities due to any cause whatsoever.

employees, Michele and Jon Ulrech, Michele Ulrech Boarding and Training, and it agents and employees, volunteers, clients, and all people present and/or involved with the property and horsemanship, riding programs, or other activities located at: 7101 Camino Tassajara, Pleasanton, CA, as a result of any use of and presence at the facility.

4. TO HOLD HARMLESS AND INDEMNIFY Horses Healing Hearts, Inc., and its agents and employees, Melissa and Mike Austin, Alex Wang, Leonids LLC, and its agents and employees, Michele and Jon Ulrech, Michele Ulrech Boarding and Training, and it agents and employees, volunteers, clients, and all people present and/or involved with the property and horsemanship, riding programs, or other activities located at: 7101 Camino Tassajara, Pleasanton, CA, from any and all liability for personal injury, property damage or death suffered by myself, my child(ren) or by a third party as a result of my use and presence at the facility.

5. THAT IN THE EVENT OF MY OR MY MINOR CHILD(REN)'S INJURY OR DEATH, OR OF THE INJURY OR DEATH OF MY WARD(S), THIS RELEASE AND HOLD HARMLESS AGREEMENT shall be effective and binding upon my heirs, next of kin, executors, administrators and assigns in relation to Horses Healing Hearts, Inc., and its agents and employees, Melissa and Mike Austin, Alex Wang, Leonids LLC, and its agents and employees, Michele and Jon Ulrech, Michele Ulrech Boarding and Training, and it agents and employees, volunteers, clients, and all people present and/or involved with the property and horsemanship, riding programs, or other activities located at: 7101 Camino Tassajara, Pleasanton, CA.

I have been given sufficient time to read, and understand, and ask questions, if any, concerning the nature and scope of this Voluntary Waiver Agreement. **I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTOOD THIS RELEASE AND HOLD HARMLESS AGREEMENT.** I am over 18 years of age and I am aware that by signing this document, I am affecting the legal rights and liabilities of myself, my heirs, executors, administrators and assigns in relation to Horses Healing Hearts, Inc., and its agents and employees, Melissa and Mike Austin, Alex Wang, Leonids LLC, and its agents and employees, Michele and Jon Ulrech, Michele Ulrech Boarding and Training, and it agents and employees, volunteers, clients, and all people present and/or involved with the property and horsemanship, riding programs, or other activities located at: 7101 Camino Tassajara, Pleasanton, CA.

The terms of this release form shall be construed as the entire agreement and may not be altered, amended, or modified except in writing and signed by both parties. The terms of this release shall be governed by the laws of the State of California. **This agreement shall continue for each and every visit to the above referenced property.**

DATE: _____

NAME: _____
(please print)

SIGNATURE: _____

RELEASE FOR MINORS UNDER 18 YEARS OF AGE

Horses Healing Hearts, Inc. Release and Hold Harmless Agreement

Horses Healing Hearts, Inc. is a 501(c)(3) corporation.
7101 Camino Tassajara Pleasanton, CA. 94588

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTOOD THIS RELEASE AND HOLD HARMLESS AGREEMENT. I am 18 years or older, and I HAVE THE AUTHORITY AS THE PARENT AND/OR GUARDIAN OF THE MINOR(S).

_____ (please print minor's full name)

_____ (please print minor's full name)

_____ (please print minor's full name)

I am aware that by signing this document I am affecting the legal rights and liabilities of the minor(s), his or her heirs, next of kin, executors, administrators, and assigns in relation to Horses Healing Hearts, Inc., and its agents and employees, Melissa and Mike Austin, Alex Wang, Leonids LLC, and its agents and employees, Michele and Jon Ulrech, Michele Ulrech Boarding and Training, and its agents and employees, volunteers, clients, and all people present and/or involved with the property and horsemanship, riding programs, or other activities located at: 7101 Camino Tassajara, Pleasanton, CA.

DATE: _____ NAME of parent or guardian: _____
(please print)

SIGNATURE: _____

EMERGENCY INFORMATION

I, _____, (if minor, parents/guardians) hereby grant permission and authority to Horses Healing Hearts, Inc., its officers and authorized employees to act for me in executing verbal instructions, or if I am unable to communicate said instructions, to act for me in dealing with physicians, available ambulance companies and hospitals, to obtain prompt medical attention for the participant named above in the event of any perceived medical emergency.

Emergency name and phone contact person(s):

Name: _____ Phone: _____

Alternate Name or Physician's Name: _____ Phone: _____

Preferred Emergency Medical Facility: _____

PHOTO RELEASE

I DO _____ or DO NOT _____ consent to and authorize the use and reproduction by Horses Healing Hearts, Inc. of any and all photographs and any other audio-visual materials taken of me for promotional material, educational activities, exhibitions or for any other use for the benefit of the program/s.

Date: _____ Signature: _____
(client, parent or legal guardian)

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