BRIDLE HILL FARM, LLC

Release and Hold Harmless Agreement for Equestrian Activities REV 4/2007

WHEREAS, the UNDERSIGNED acknowledges the inherent risks involved in riding and working around horses, which risks include but limited to bodily injury from using, riding or being in close proximity to horse, among other risks, and further, that both horse and rider can be injured in normal use or in competition and schooling;

IN CONSIDERATION, therefore, for the privilege of riding and/or working, around horses at Bridle Hill Farm, LLC, the UNDERSIGNED does hereby agree to hold harmless and indemnify Bridle Hill Farm, LLC, and further release them from any liability or responsibility for accident, damage, injury, or illness to the UNDERSIGNED or any horse owned by the UNDERSIGNED or to the family member or spectator(s) accompanying the UNDERSIGNED on the premises of Bridle Hill Farm, LLC.

UNDERSIGNED understands and agrees to abide by all Terms and Conditions, and Barn Safety Rules as posted and outlined on the Bridle Hill Farm, LLC website www.bridlehillfarm.com. And, UNDERSIGNED shall always wear appropriate boots or riding shoes with low heels are required while mounted, and everyone regardless of age must wear an approved riding helmet at all times while mounted. Bridle Hill Farm, LLC will provide an approved riding helmet if UNDERSIGNED does not have one.

Bridle Hill Farm, LLC occasionally photographs and/or videotapes students involved in equestrian activities and events that maybe held on Bridle Hill Farm, LLC premises or may occasionally photograph and/or videotape students involved in equestrian activities and events that maybe held on other farm premises. UNDERSIGNED understands and consents upon providing its signature below.

UNDERSIGNED AGREES IT HAS READ THE ABOVE PARAGRAGHS AND ACKNOWLEDGES SUCH UPON PROVIDING ITS SIGNATURE BELOW.

Student or Parent or Guardian's signature		Date		
Student's name (print)	Age	E-mail address	PRADESC	
Divino 323		7)4	SHOWI	
Address	FFERSON	VILLE		
City	(100 Est (100)	State	Zip Code	
Phone number	NEW YOR	Cell number		
If under the age of 18, please fill out parent or guar Parent/guardian's name (print)	dian information:	E-mail address		
Address				
City		State	Zip Code	
Phone number		Cell number		
r none number		Cen number		