

Ryan & Emily Rose (906)-364-0379
N8294 County Rd. E Brooklyn, WI 53521

Release of Liability Waiver

“Notice”

A person who is engaged for compensation in the rental of equines or equine equipment or tack or in the instruction of a person in the riding or driving of an equine or in being a passenger upon an equine is not liable for the injury or death of a person involved in equine activities resulting in the inherent risks of equine activities, as defined in “section 895.481(1)(e) of the Wisconsin Statutes.”

The undersigned, on his or her own behalf, of his or her heirs, personal representatives of assigns, hereby releases Ryan & Emily Rose, individually, and Ryan & Emily Rose, its agents, employees and those who accommodate these individuals and their business by furnishing facilities, equipment, or personnel from any claims whatsoever arising out of any damage, loss, or injury that occurs to me, my children, my guests, or my animals, or other personal property, caused by those specified, whether by their ordinary or gross negligence, or omission, Act of God, or otherwise which occurs as a result of those specified. I further understand that this is a release and waiver and that I am giving up substantial rights and that I have had the opportunity to seek the advice and counsel before signing this release and waiver.

PROTECTIVE HEADGEAR WARNING: I AGREE THAT: I for myself and on behalf of my child and/or legal ward have been fully warned and advised by Ryan & Emily Rose that protective headgear which meets or exceeds the quality standards of the SEI CERTIFIED ASTM STANDARD F 1163 Equestrian Helmet is recommended and should be purchased and worn while riding and I do understand that the wearing of such headgear may reduce severity of some of the wearer’s head injuries and possibly prevent the wearer’s death from happening as the result of a fall and other occurrences. **Initial**_____

I acknowledge that by signing the release and waiver that I am assuming full responsibility and accepting full risk of any injury, damage, or loss occasioned to myself, my children, my guests, or my animals or other personal property which I have an interest in which may occur during or as a result of the services or facilities or accommodations provided by those specified.

In the event of an action against Ryan and Emily Rose all claims must be made in the county in which Ryan & Emily Rose reside. All trials resulting from claims must be held in country and county of residence of Ryan & Emily Rose.

I further acknowledge and state that I have a reasonable opportunity, prior to signing this release and waiver, to view the grounds and facilities upon which the services are provided and declare that to the best of my knowledge, information and belief, that the grounds and facilities, including fencing, appear to be safe and satisfactory.

I further state and declare that I have entered this release and waiver voluntarily, without threat or force, and that I am knowledgeable, or have had the opportunity to become knowledgeable by seeking competent advice and counsel prior to signing this release of liability waiver.

BY EXECUTION OF THIS AGREEMENT, BELOW SIGNED ACCEPTS FULL RESPONSIBILITY FOR AND ALL INJURIES OR DAMAGES WHICH MAY OCCUR TO THE BELOW SIGNED, THEIR CHILDREN OR GUESTS, IN, ON OR ABOUT THE PREMISES OR THROUGH THE USE OF THE ABOVE NAMED SERVICES.

FURTHER, BELOW SIGNED ACKNOWLEDGES THAT CERTAIN OF THE ACTIVITIES INVOLVED IN THE ABOVE NAMED ACTIVITIES, EQUIPMENT, OR PREMISES ARE INHERENTLY DANGEROUS.

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE INFORMATION AND TERMS CONTAINED IN THIS DOCUMENT.

Printed Name_____Signature_____Date_____

If minor, Parent/guardian Printed Name_____

Signature_____Date_____