

**Quail Roost Riding School Release Form**  
**Release and Indemnification Agreement**

The undersigned desires to employ the services of Quail Roost Farm Inc., and/or Equiventure LLC., and/or Sara Hamilton-Conversano, and/or Equienterprises, Inc., which services include but are not limited to riding instruction, boarding, training, showing, and/or shipping of horses and ponies, storing and/or shipping of equipment, tack and other items of personal property.

The undersigned understands fully the risks of accident and of injuries or damages to persons or porperty in connection with the above services and further agrees that the size of classes and fees charged by Quail Roost Riding School, and/or Equiventure LLC., and or Sara Hamilton-Conversano, and/or Equienterprises, Inc., for services are too small to permit their purchase of insurance covering such matters as liability for negligence, fire loss, and theft.

In consideration of the services of Quail Roost Riding School, and/or Equiventure LLC., and or Sara Hamilton-Conversano, and/or Equienterprises, Inc., the undersigned agrees to assume the risks of accidents, injuries, and damages to persons or property arising from any cause what-so-ever connected with said services. The agreement covers horses, ponies, and personal property now or in the future owned, borrowed, or leased by the undersigned.

Whenever there is more than one person signing this release, each of the provisions herof applying to the "undersigned" shall apply jointly and severally to each person.

**THIS AGREEMENT SHALL BE GOVERNED BY THE LAWS OF THE STATE OF NORTH CAROLINA.**

Date: \_\_\_\_\_

\_\_\_\_\_  
Student Name (Print) Student Age

\_\_\_\_\_  
Student Name (Print) Student Age

\_\_\_\_\_  
Signature \*

**\*(The Parent or Guardian must sign if the student is under the age of 18)**

\_\_\_\_\_  
Address

( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Phone Number Cell Number

\_\_\_\_\_  
Email Address

Emergency Contact Information

1) In Case Of Emergency Contact This Person (Indicate Relationship):

\_\_\_\_\_ At This Phone Number: (\_\_\_\_) \_\_\_\_\_  
\_\_\_\_\_

2) In Case of Injury, are there any special considerations that should be provided to emergency personel?(ie. Allergies): \_\_\_\_\_  
\_\_\_\_\_

3) Hospital prefrence: \_\_\_\_\_

4) School name: \_\_\_\_\_

5) How did you here about us?:

Friend

Advertisement \_\_\_\_\_  
Name of paper or source

Internet \_\_\_\_\_  
List web site

Other \_\_\_\_\_  
Please indicate

**Required Equipment and Riding Gear**

- (1) An **ASTM/SEI approved** helmet must be worn *at all times* while riding.
- (2) Helmets must fit properly and be securely fastened under chin.
- (3) A hard soled shoe or boot with a heel.
- (4) Riding breeches or jeans.
- (5) Riding boots, full or half chaps, crop, gloves (all optional).