

# EQUINE SUMMER CAMPS

at Knight Stables



## AUTHORIZATION RISK ACKNOWLEDGMENT AND DISCLAIMER

### **\*\*Equestrian Activity Authorization Form\*\***

I, \_\_\_\_\_, as a participant, parent, and/or guardian of \_\_\_\_\_, hereby acknowledge and understand that the practice of equestrian sport and participation in equestrian activities involve inherent risks and the potential for serious injury. Therefore, I willingly and voluntarily liberate and discharge without limitation the owners, trainers, and monitors of Knight Stables, from any and all responsibilities concerning the aforementioned activities, accepting all risks for any damage, injury, or loss.

The undersigned, whether in their name or on behalf of their child or child in ward, affirms that they are physically and emotionally capable of participating in equestrian activities. The undersigned recognizes the inherent risks associated with equestrian sports and acknowledges the importance of adhering to the rules and regulations of the club, as well as following the instructions provided by the monitors.

**Furthermore, the undersigned agrees to:**

- 1. Immediately withdraw themselves or their child/ward from barn activities if, upon observation, they become aware that the conditions, circumstances, or procedures are potentially dangerous.**
- 2. Promptly inform barn personnel if they observe any deterioration in the physical or mental status of the participant.**

By signing this authorization form, I affirm that I have read and fully understand its contents. I willingly accept the risks associated with equestrian activities and agree to comply with all safety guidelines provided by Knight Stables.

**Participant/Parent/Guardian Name:** \_\_\_\_\_

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