



## Registration

Sessions are comprised of four one-hour classes. Classes are Thursday from 6:00-7:00 pm. The cost is \$130. Send these forms with payment to Exceptional Equestrians. You will receive confirmation via email.

**Write in the dates of the session for which you wish to register:**

**Girls Rule!**

\_\_\_\_\_

**Maverick**

\_\_\_\_\_

Contact us at [cklak@exceptionalequestrians](mailto:cklak@exceptionalequestrians) or (920) 347-3174 for upcoming dates.

**Group booking**

Group name \_\_\_\_\_

Dates \_\_\_\_\_

Name of participant: \_\_\_\_\_

Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

How did you learn about this program? \_\_\_\_\_

What are your main reasons for participating? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Goals (What would you like to achieve through this experience?)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Participant/Parent/Guardian

Date



**In the event of an emergency, please contact:**

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Name: \_\_\_\_\_

Phone: \_\_\_\_\_



## Client 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 from the inherent risks of equine activities, as defined in section 895.481(1)(e) of the Wisconsin Statutes.**

I understand and acknowledge that all aspects of working with equine industry include certain risks. Included among them, Wis. Stat. § 895.481(1)(e) provides that “Inherent risk of equine activities” means a danger or condition that is an integral part of equine activities, including all of the following: 1. The propensity of an equine to behave in a way that may result in injury or death to a person on or near it; 2. The unpredictability of an equine’s reaction to a sound, movement, or unfamiliar object, person or animal; 3. A collision with an object or another animal; 4. The potential for a person participating in an equine activity to act in a negligent manner, to fail to control the equine or to not act within his or her ability; and 5. Natural hazards, including surface and subsurface conditions. In addition, permitting a child to work with equine activities includes proportionally increased inherent risk. I acknowledge that equines are inherently dangerous and may result in property damage, injury or death. Knowing and appreciating these dangers, I desire for myself and/or my child or legal ward (collectively “us”, “we”, or “our”) to participate in equine activities on the property of the Exceptional Equestrians Company and/or Country Kids, Inc.

In consideration for the privilege of participating in equine-assisted learning, we release Exceptional Equestrians Company and/or Country Kids, Inc., the horse owner, the owner of the equipment, and all employees, volunteers or other agents of the company collectively (the “Releasee”) from any liability or responsibility for any accident or injury to us, members of our family or our guests during or in connection with any equine activities we engage in of the property Releasee. We agree that we will never sue Releasee for property damage, personal injury, or death arising out of equine activities, whether arising from the condition or actions of the horse, equipment, or riding facility at which the equine activities are conducted. We understand we are releasing Releasee from liability for its own negligence, including the selection of any equine or Releasee’s assessment of our ability to handle or work with any equine.

I hereby indemnify the Releasee as a result of any accident, casualty or event that may result through the negligence of us, our family members or guests. I understand that if my family members, guests or I am negligent or alleged to have been negligent and because of this negligence, Releasee is sued, I will be responsible for any costs, attorneys’ fees or damages incurred by Releasee.

I have read and understand the above, “Release from Liability” agreement.

Name of Participant: \_\_\_\_\_  
Signature of \_\_\_\_\_  
Participant/Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_



## Photography Release

I hereby authorize Exceptional Equestrians, hereafter referred to as "Company," to publish photographs and/or videos taken of myself and/or the minor child(ren) listed below, for use in the Exceptional Equestrians' print, online and video-based marketing materials, as well as other Company publications.

I hereby release and hold harmless Exceptional Equestrians from any reasonable expectation of privacy or confidentiality for myself and for the minor child(ren) listed below associated with the images specified above. Further, I attest that I am the parent or legal guardian of the child or children listed below and that I have full authority to consent and authorize Exceptional Equestrians to use their photograph.

I further acknowledge that participation is voluntary and that neither I nor the minor child(ren) will receive financial compensation of any type associated with the taking or publication of these photographs or participation in company marketing materials or other Company publications. I acknowledge and agree that publication of said photos confers no rights of ownership or royalties whatsoever.

I hereby release Exceptional Equestrians, its contractors, its employees and any third parties involved in the creation or publication of Company publications, from liability for any claims by me or any third party in connection with my participation or the participation of the minor children listed below.

**Check one:**     **Consent**     **Non consent**

### Authorization:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Participant/Parent/Guardian)

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ ZIP: \_\_\_\_\_

Relationship to participant: \_\_\_\_\_  
(Self/Parent/Guardian)

Names/Age of participant:

Name: \_\_\_\_\_ Age: \_\_\_\_