



CHILD WAIVER AND RELEASE OF LIABILITY FORM

THIS DOCUMENT WILL AFFECT YOUR LEGAL RIGHTS AND LIABILITIES PLEASE READ CAREFULLY

I request permission for my child _____ to participate in horseback riding and other stable activities at Gordonhurst Equestrian Centre located at 7960 Castleberg Side Road, Caledon Ontario.

I fully understand that horseback riding, handling, grooming of horses and other stable activities are very dangerous. I wish to allow my child to participate in these activities knowing that they are dangerous.

I accept and assume all the risks of injury (Including death) to my child or damage to my property. I represent and warrant that I have the authority to give this release.

In exchange for my child being permitted to participate in these activities, for my child, myself, my child's heirs, guardians, and legal representatives, I release and agree not to make or bring any claim of any kind against Cindy Bolen (Gordon), James Bolen, Gordonhurst Equestrian Centre, or its officials, directors, members, employees, representatives, or any land holders or other persons making property available to Cindy Bolen (Gordon) or Gordonhurst Equestrian Centre, for any injury (including death), to my child or any damage to my property, whether from anyone's negligence or not, or any other cause, arising out of my child's participation in these dangerous horseback riding or related activities; and I also agree that if anyone makes any claims because of any injury to my child (including death), or for any damage to my property, I will keep all those released by this agreement free of any damages or costs because of those claims.

I ACKNOWLEDGE reading the above Release and Waiver of Liability, which I UNDERSTAND.

I FURTHER ACKNOWLEDGE receiving a copy of this Release and Waiver of Liability.

Signature of Parent / Legal Guardian: _____

Name of Parent / Legal Guardian (Printed): _____

Child's Name (Printed): _____

Witness: _____

Dated: _____

WHERE EQUESTRIAN EXCELLENCE BEGINS

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