



Lakes Region Riding Academy

Release and Waiver

26 Young Road
Gilford, NH 03249
Owner/Trainer
Julie Lawrence
603-707-7540

Please Print:

Name: _____

Child's name (if under 18): _____ DOB: _____

Horseback riding can be perilous to personal property, to those who work with the horses, and to the horses themselves. The rider or the rider's guardian must recognize these perils, and by executing this application, agree to hold Lakes Region Riding Academy, LLC, its agents and employees, harmless, and to indemnify them against any claim brought against Lakes Region Riding Academy, LLC, James Cookman, its agents and employees, by any third party relating to any action undertaken by the rider or their guardian in connection with the activity for which application is made.

Dated: _____ Duly Authorized: _____

Dated: _____ Duly Authorized: _____

Please Write: *" I understand horseback riding is very dangerous and I have read and understand this release. I agree to hold the above named parties harmless. "*

Initial: _____

Date: _____