



Horsemanship Clinic with Shane Kelly

May 12, 2018

Check in: 8 AM

Clinic begins: 9AM

Lunch will be provided

COST: \$200.00

STONEWALL EQUINE REHAB & FITNESS CENTER

485 Fulton Ranch Road Stonewall, TX 78671

Mailing Address: P.O. BOX 448 Stonewall, TX 78671

Phone: 830-644-2001 or (210) 787-0505

Email: wecare@stonewallequinerehab.com

Clinician: Shane Kelly

OWNER

Owner Name: _____ Home Phone: _____
Email: _____ Cell Phone: _____
Address: _____
City: _____ State: _____ Zip: _____ T-Shirt Size: _____

HORSE INFO

Name: _____
Sex: _____ Breed: _____ Age: _____ Color: _____
Discipline: _____ ***MUST HAVE and SHOW PROOF of Current Negative Coggins***
Coggins: Horse Accession Number: _____ TEST DATE: _____

****I understand that payment for services is immediate and after services are carried out.
Checks are immediately and automatically deposited at time of receipt.*

Checks due by: **MAY 1, 2018** ; Please make checks payable to **SERF**

If payment is denied from the bank, insufficient funds charge is \$30.00 (MAIL TO P.O. BOX 448 STONEWALL, TX 78671)

LIABILITY WAIVER

In CONSIDERATION of receiving permission to participate in the above named program, or any activity associated with the above named program I _____, do hereby RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE SERF, (Stonewall Equine Rehab and Fitness Center), any officers, servants, agents, or employees (hereinafter referred to as RELEASEES) from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage or injury, including death, that may be sustained by me, or to any property belonging to me, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES, or otherwise, while participation in said programs, or while in, or upon any premises where said programs are being conducted.

I understand that there are inherent risks pertaining to horses and horse activities. I further understand that I am requesting the services to be provided by SERF and that I am fully aware that there are no warranties, either expressed or implied, or promises of results of any kind or character regarding the services provided by SERF or the results of the services by SERF. Accordingly, I hereby release, waive, discharge, indemnify, and hold harmless SERF and its employees, from any and all claims, of any kind of character, that I might have now, or in the future, to any claim of injury or damage to the horse named above. I understand that payment for services is immediate and after services are carried out. Finally, I understand that SERF is not responsible for any equestrian activities that result in an accident during track use, arena use, or for any equine events or participation while on the premises of SERF. **I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OF LOSS, PROPERTY DAMAGE, OR PERSONAL INJURY, INCLUDING DEATH**, that may be sustained by me, or any loss or damage to property owned by me, as a result of being engaged in such activity, **WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES**, or otherwise.

I FURTHER HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS the RELEASEES from any loss, liability, damage or costs, including court costs and attorney's fees, that may incur due to my participation in said activity, WHETHER CAUSED BY NEGLIGENCE OF RELEASEES, OR OTHERWISE.

It is my express intent that this Release and Hold Harmless Agreement shall bind the members of my family and spouse, if any, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE the above named RELEASEES. I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be considered in accordance with the laws of the State of Texas.

IN SIGNING THIS RELEASE, I ACKNOWLEDGE AND REPRESENT THAT I HAVE READ THE FOREGOING WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT, UNDERSTAND AND SIGN IT VOLUNTARILY AS MY OWN FREE ACT AND DEED; NO ORAL REPRESENTATION, STATEMENT, OR INDUCEMENTS, APART FROM THE FOREGOING WRITTEN AGREEMENT HAVE BEEN MADE; I AM AT LEAST EIGHTEEN (18) YEARS OF AGE, FULLY COMPETENT, AND I EXECUTE THE RELEASE FOR FULL, ADEQUATE AND COMPLETE CONSIDERATION FULLY INTENDING TO BE BOUND BY SAME.

SIGNATURE: _____ DATE: _____

