

**COWGIRL SPIRIT RESCUE DRILL TEAM**  
**VOLUNTEER/MEMBER INFORMATION AND LIABILITY RELEASE**

**Contact Information:**

Volunteer's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Liability/Information Release:**

As a volunteer at Cowgirl Spirit Rescue Drill Team (CSRDT), I acknowledge the risks and potential for risks when working with rescue horses. However, I feel that the possible benefits to myself and the horses I work with are greater than the risk assumed. I hereby, intending to be legally bound, for myself, my heirs and assigns, executors or administrators, waive and release forever all claims for damages against CSRDT, its board of directors, instructors, volunteers, and/or employees for any and all injuries and/or losses I may sustain while participating in CSRDT.

As a volunteer at CSRDT, I understand that I am required to report any accident or incident, no matter how minor, to a CSRDT staff member so that a report may be filed, if necessary. (Examples of incidents that must be reported: anyone being bitten or stepped on by a horse, etc). I also agree to follow rules posted in the barn or given by an instructor or CSRDT staff member, with the understanding that these rules exist for the safety of the riders, volunteers, and staff members.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Parent/Guardian Signature (if under 18 years old)

Witness: \_\_\_\_\_

**Authorization for Emergency Medical Treatment:**

In the event emergency medical aid/treatment is required due to illness or injury during the process of receiving services, or while being on the property of the agency, I authorize CSRDT to secure and retain medical treatment and transportation if needed

**In Case of Emergency:**

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

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

Physician's Name: \_\_\_\_\_

Preferred Medical Facility: \_\_\_\_\_

Health Insurance Co: \_\_\_\_\_ Policy #: \_\_\_\_\_

Allergies: \_\_\_\_\_ Blood Type: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Parent/Guardian Signature (if under 18 years old)

Witness: \_\_\_\_\_

**Meadow Lake Farm, LLC - 9922 284<sup>th</sup> Ave NE - Carnation, WA 98014**  
**RELEASE, COVENANT NOT TO SUE AND INDEMNITY AGREEMENT**

I, \_\_\_\_\_, in order to induce Meadow Lake Farm, LLC to provide the opportunity to permit members, affiliates and agents of Cowgirl Spirit Rescue Drill Team (CSRDT) to board, pasture, ride, daily care of, and train horses on their premises and in consideration of their provision of these services, agree as follows:

1. All members, affiliates and agents fully understand and acknowledge that all equestrian related activities are inherently dangerous and that riding and caring for horses involves risks of personal injury. All members, affiliates and argents of CSRDT, further understand that accidents involving horses are frequent, that the condition of the land is often hazardous, and that footing is rarely perfect. In the light of this acknowledgement, all members, affiliates and argents of CSRDT take full responsibility for any and all harm that comes to all members, affiliates and argents of CSRDT as a result of riding and caring for horses on the premises of Meadow Lake Farm, LLC.
2. All members, affiliates and argents of CSRDT acknowledge that no representations have been made that operating on the premises of Meadow Lake Farm LLC, will be safe, but that Meadow Lake Farm, LLC has expressly represented herein that riding and caring for horses involves risk, which the members, affiliates and argents of CSRDT assume as a condition of being allowed to ride and care for horses on Meadow Lake Farm LLC's premises.
3. Except for gross negligence or willful misconduct, members, affiliates and agents of CSRDT release Meadow Lake Farm LLC from any and all responsibility for accidents and injuries and that they will indemnify and hold Meadow Lake Farm, LLC harmless against all claims, damages and cases of action for any injuries to the person or property of the members, affiliates and argents of CSRDT, including attorney's fees and all cost of defending against such claims and causes of action made by or on behalf of the members, affiliates and argents of CSRDT.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ By: \_\_\_\_\_  
Parent/Guardian Signature (if under 18 years old)

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

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**CSRDT RIDER'S RELEASE OF LIABILITY AND INDEMNIFICATION**  
**(Please complete this section if you aspire to be a riding member of Cowgirl Spirit)**

This release is made and entered into by \_\_\_\_\_, herein called the "rider," for the benefit and protection of Cowgirl Spirit Rescue Drill Team, (CSRDT) its officers and members. The undersigned rider (or minor rider's parent or guardian) **does hereby release, discharge, hold harmless and agree to indemnify** CSRDT and its agents, members, volunteers, Officers and Directors, and any other person, organization or corporation charged or chargeable with liability, their heirs, administrators, executors, successors and assigns, from any and all claims, damages, costs, expenses, loss of service, actions, and causes of action arising out of any act or occurrence caused by, or arising out of, rider's participation in equine activities associated with CSRDT, and/or sponsored by CSRDT, including but not limited to, death or injury to the person or property of the rider or others.

Equine activities include, but are not limited to. entering, occupying, using, boarding, training, participating in horseback lessons or riding with CSRDT at any location where CSRDT are the sponsors of any equine activity, and also includes use of CSRDT's equipment or tack and use of any equine. The rider acknowledges that equine activities involve risk of injury and the rider agrees to assume and solely bear that risk, whether or not the rider is using the equipment, tack, or any equine furnished by CSRDT or its agents. The rider will make his or her own determination of the safety of engaging in any equine activity and releases CSRDT from liability for any wrongful determination of safety. The rider is responsible for inspecting the conditions of the premises, equipment, tack and/or any equine before engaging in equine activities.

This release of liability is in consideration for use of CSRDT's equipment, tack or any equine furnished by CSRDT and in consideration of any instruction or lessons or activity provided or sponsored by CSRDT. This release is binding on my estate, heirs, personal representatives, and agents. In addition, I hereby authorize CSRDT to obtain treatment for my horse, at my expense, in the event of an emergency. The maximum amount that I authorize is \$\_\_\_\_\_.

**BY MY SIGNATURE BELOW, I ACKNOWLEDGE THAT I HAVE CAREFULLY READ THE ENTIRE AGREEMENT AND UNDERSTAND AND AGREE TO THE RELEASE, INDEMINFICATION AND OTHER TERMS ABOVE.**

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ By: \_\_\_\_\_  
Parent/Guardian Signature (if under 18 years old)

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