Horseback Riding Registration Form

HAMPSHIRE TOWNSHIP PARK DISTRICT 390 South Avenue • PO Box 953, Hampshire, IL 60140 • FAX 847-683-1741

Primary Guardian			Secondary Guardian			
First	Last		First	Last		
Address		PO Box	Address		PO Box	
City	State	Zip	City	State	Zip	
Home Phone			Home Phone			
Work Phone	Extension		Work Phone	Extension		
Cell Phone			Cell Phone			

Additional Information			
□ Hampshire Township Resident	□ Non-Resident		
Email Address			
Emergency Contact		Relation	Phone

Sign the Waiver

Please read the Waiver and Release on the reverse side of this form.

I have read and fully understand the important warning of risk, assumption of risk and waiver and release of all claims on the reverse side of this form.

Signature (guardian's signature required if participant is under 18)

Participant (include last name if different)	Birth I	Date	M/F	Grade	Activity #	Activity Na	ame	Fee
1)								
2)								
□ I would like to make a donation to the Hampshire Township Park District Scholarship Fund								
Circle donation amount and add to Fee Total:	\$5 \$	10	\$15 \$	\$20 oth	er amount \$		Fee Total	
Please describe any accommodations needed to have a successful inclusion in to the programs:								
List any medical conditions:								

Payment Options Cash / Amount \$	□ Check #	/ Amount \$	
□ MasterCard □ VISA Amount of Charge \$			
Card #	I	Expiration Date	V-Code
Cardholder Name	Authorized Signature		

Date

HORSEBACK RIDING LESSONS WAIVER & RELEASE

IMPORTANT INFORMATION

The Hampshire Township Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Hampshire Township Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participant's safety. However, participants and parents/guardians of minors registering for this activity must recognize that there is an inherent risk of injury when choosing to participate where animals are involved.

You are solely responsible for determining if you or your minor child/ward are physically fit and/or adequately skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

Horseback riding is a unique program to the Hampshire Township Park District. Injuries are inevitable, because it is a physically unequal balance between the skills of a rider and the strength of an animal. You should always wear a protective helmet and body padding to help minimize injuries.

WARNING OF RISK

Horseback riding lesson participation is intended to engage the physical, mental and emotional resources of each participant. Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury, including head/brain injury, spinal cord injury, bone and joint injuries, and death. All hazards and dangers cannot be foreseen. Certain inherent risks include falling from an animal; being fallen on, stepped on, or kicked by an animal; extreme stress and impact on muscles and bones; poorly maintained equipment (i.e. weakened saddle cinches, frayed ropes, and so on); failing to wear protective equipment; unpadded chutes and gates; and the propensity of an animal to behave in dangerous ways that may result in injury to the participant, including, but not limited to the inability to predict an animal's reaction to sound, movements, objects, persons, or other animals and actions by the animal due to fright, anger, stress, insect bites or natural reactions such as bucking, jumping sideways, forward or backwards, kicking, and biting. Other risks include losing balance; animals that trip or get injured; poor ring conditions; poor mounting, dismounting or riding technique; inadequate instruction/supervision; inadequate emergency medical services; and all other risks inherent to horseback riding participation. In this regard, it must be recognized that it is impossible for the Hampshire Township Park District to guarantee absolute safety.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in this activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this activity (including transportation services and vehicle operations, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in this activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program/activity against the Hampshire Township Park District, including its officials, agents, volunteers and employees.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

PARTICIPATION WILL BE DENIED

If the signature of adult participant or parent/guardian and date are not on this waiver.