

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

**AGREEMENT FOR RELEASE AND WAIVER OF LIABILITY FOR A
MINOR CHILD**

I request permission for my child, _____ to participate in horseback riding and other activities at **SOUTH ALGONQUIN SUMMER CAMP** and confirm that I have the authority to do so.

I fully understand that horseback riding, grooming, tacking up and general working with horses including other stable activities are very dangerous.

I accept and assume all risks of injury (including death) to me or my property.

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 **SOUTH ALGONQUIN SUMMER CAMP / TERI AND/OR CHRIS LINDSAY OR ITS OWNERS, OFFICERS, DIRECTORS, MEMBERS, EMPLOYEES, OR GUESTS AND ANY LAND OWNERS, LAND HOLDERS OR OTHER PERSONS MAKING PROPERTY AVAILABLE TO SOUTH ALGONQUIN SUMMER CAMP / TERI AND/OR CHRIS LINDSAY**, 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.

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 have read and understand this agreement. I understand that this document contains a promise not to sue **SOUTH ALGONQUIN SUMMER CAMP and all those associated with them.**

DATED THIS DAY FOR THE 20__ SEASON : _____

SIGNATURE: _____

PRINT NAME: _____

EMAIL ADDRESS: _____