



**AGAPE RANCH**

# Thanksgiving Camp

9:00am to 1:30pm

K to 2nd grade: Wed, 11/21 & 3rd to 6th grade: Fri, 11/23

Name \_\_\_\_\_

Grade/Gender \_\_\_\_\_ T shirt size \_\_\_\_\_ Riding experience \_\_\_\_\_

Amount paid \_\_\_\_\_

Medical Concerns or Other \_\_\_\_\_

Address \_\_\_\_\_

Email: \_\_\_\_\_

Guardian/Emergency Contact Name: \_\_\_\_\_

Phone \_\_\_\_\_

Relationship \_\_\_\_\_

**This document will affect your legal rights and liabilities. Please read carefully.**

**Agreement for Acceptance of Risk and Waiver Responsibility**

I request permission for my child to participate in horseback riding and other equestrian related activities organized and operated by Agape Ranch La, LLC.

I fully understand that horseback riding, handling, and grooming of horses and other stable activities can be very dangerous.

I wish for my child to participate in these activities knowing that they can be dangerous. I represent and warrant that I have authority to give this release.

I also understand that while participating in this high-risk sport, it is mandatory that a helmet be worn while mounted. By not wearing proper safety headgear, I fully accept all responsibilities for my child's action. I will assume all risk of injury to my child 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 representative, I release and agree not to make or bring any claim of any kind against Agape Ranch La, LLC, or officials, servants, employees, representative, for any injury to my child or any damage to my property arising out of my child's participation in these horseback riding or related activities.

I acknowledge as parent/guardians of \_\_\_\_\_ that I have read and fully understand and agree to the terms and conditions stated herein and that it is binding upon my executors, heirs and assigns.

Signature of parent/guardian \_\_\_\_\_

Print Name \_\_\_\_\_ Child's Name \_\_\_\_\_

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