

LANCASTER EQUESTRIAN
551 Cooper Road, Red Bank, NJ 07701
732-421-6791

INSTRUCTORS
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ALL ACTIVITY RELEASE AND WAIVER OF LIABILITY

PLEASE PRINT CLEARLY:

Release is for riding lessons and any other activity to which a person comes on the property.

I, _____, residing at _____ hereby state on behalf of myself and/or on behalf of my minor child, _____ that:

I HAVE READ THE WARNING THAT:

UNDER NEW JERSEY LAW, AN EQUINE EQUESTRIAN AREA OPERATOR IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ANIMAL ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ANIMAL ACTIVITIES, PURSUANT TO P.L. 1997,c.287(C5:15-1 et seq).

And further that:

Terrain, horses, and other hazards, which can result in serious injury.

I accept the responsibility of protecting myself from injury by being careful around the natural dangers and around animals.

I represent that I have medical insurance and lost wage insurance which will adequately cover me in the event of injury.

I agree that I will not file any lawsuit seeking punitive damages.

I hereby irrevocably waive the right to trial by jury.

I hereby irrevocably certify that I have read and accept the above terms. In the event that I file a lawsuit in violation of the above terms I agree to be responsible for all legal fees of any entity or person which must defend said lawsuit.

PLEASE PRINT CLEARLY:

Signature of ADULT Participant _____

Print Name _____ Date: _____

Address _____ City _____ State & Zip _____

Phone: _____ Email: _____

For Parent or Guardian: (Must be completed for participants under the age of 18)

Signature of Parent/Guardian _____

Print Name _____ Date _____

Address _____ City _____ State & Zip _____

Phone _____ Email _____

(Rev 2-1-17)

WITNESSED _____ Date _____