



**Thistle Creek Ranch, LLC**  
**Fox Lane, Wilder, ID 83676**  
**Equestrian Release, Assumption of risk, and Indemnification**

**THIS DOCUMENT WAIVES IMPORTANT LEGAL RIGHTS, READ IT CAREFULLY BEFORE SIGNING**

Rider Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date: \_\_\_\_\_  
 (If minor)

Rider Address: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Horse Name: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Emergency Contact Name (2): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

**I AGREE** in consideration for my participation in the open practice riding to the following:

~ To participate voluntarily in open practice riding with my horse, as a rider, handler, lessee, owner, agent, coach, trainer, or as a parent or guardian of a junior rider. I am fully aware and acknowledge that horse sports and the competition involve inherent dangerous risk of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering, or death herein after referred to as HARM.

~ Release Thistle Creek Ranch, LLC, Dennis &/or Stacie L. Harvey, heirs and competition from all claims for money damages or otherwise for any HARM to me or my horse and for any HARM caused by me or my horse to others, even if the HARM resulted, directly or indirectly, from the negligence of Thistle Creek Ranch, LLC, Dennis &/or Stacie L. Harvey, @ 28098 Fox Lane, Wilder, ID or the other riders.

~ Expressly assume all risks of HARM to me or my horse including HARM resulting from the negligence of Thistle Creek Ranch, LLC, Dennis &/or Stacie L. Harvey, Terri Stillwaugh, heirs and other riders.

~ Indemnify (that is, to pay any losses, damages, or cost incurred by) Thistle Creek Ranch, LLC, Dennis &/or Stacie L. Harvey, heirs, and other riders, and hold them harmless with respect to claims for HARM to me or my horse, and for claims made by others for any HARM caused by me or my horse at the open practice ride.

~ Entitled to wear protective equipment without penalty and acknowledge that Thistle Creek Ranch, LLC, Dennis &/or Stacie L. Harvey, encourage me to do so.

If I am a parent or guardian of a junior participant, **I CONSENT** to the child's participation and **AGREE** to all of the above provisions and **AGREE** to assume all of the obligations of this release on the child's behalf.

**I AGREE** that Thistle Creek Ranch, LLC, Dennis &/or Stacie L. Harvey, the activities/show/competition as used above includes all of their heirs, officials, officers, directors, employees, agents, personnel, volunteers, and affiliated organizations.

**BY SIGNING BELOW, I FURTHER AGREE TO BE BOUND BY ALL APPLICABLE THISTLE CREEK RANCH, LLC RULES AND ALL TERMS AND PROVISIONS OF THIS ENTRY FORM.**

\_\_\_\_\_  
 Exhibitor Signature Age (if minor) Date

\_\_\_\_\_  
 Guardian Signature (if exhibitor is a minor) Date

\_\_\_\_\_  
 Horse Owner Signature (if different from exhibitor) Date