

Spring Valley Equestrian Center, Inc.  
56 Paulinskill Lake Road  
Newton NJ 07860

APPLICATION FOR RIDING LESSONS' (CHILD)

CHILD'S NAME \_\_\_\_\_ BIRTH DATE \_\_\_\_\_ AGE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_

PREVIOUS RIDING EXPERIENCE \_\_\_\_\_ Zip \_\_\_\_\_

ALLERGIES OR MEDICAL PROBLEMS \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

WORK( MOTHER) PHONE \_\_\_\_\_ WORK(FATHER'S) \_\_\_\_\_

RELEASE:

The undersigned acknowledges that they are the parents/guardian of the child and that in consideration of their child being permitted to participate in riding activities at Spring Valley Equestrian Center and they assume the risk of injury to the rider and agree that they will be responsible for and do hereby release Spring Valley Equestrian Center from all liabilities, including negligence, by reasons of injury to their child or their property during the day camp and riding camp and riding activities, including but no limited to, riding lessons, trail rides, exercise, jumping, caring for the horses before and after riding, fox hunting, showing, etc.

It is also agreed that the rider will wear safety equipment, I e. hard hat and hard boots at all times when riding.

Signature \_\_\_\_\_ Date \_\_\_\_\_

WARNING UNDER NJ LAW, AN EQUESTRIAN OPERATION IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE/ANIMAL ACTIVITIES RESULTING FROM THE INHERENT RISK OF EQUINE/ANIMAL ACTIVITIES PURSUANT TO PL CHAPTER 287