

Pony Party Participant Release of Cascade Stables, INC

By this agreement, made and entered into this _____ day of _____,
20____, I, _____, a major over eighteen years of age
as Representative of Pony Party to be held on the _____ day of _____
20_____ agree as follows:

1. All children must be accompanied by an adult at all times. No unattended children inside the stables.
2. All children must wear a helmet while mounted.
3. Absolutely NO hand-feeding horses.
4. No inflatable houses. Other forms of entertainment must be approved by the stables before the time of the Pony Party
5. No Alcohol or Liquor on Cascade Stables property.
6. Pony Party will be paid in full (\$300 per horse per 2 hours) at the time of the party.

LIABILITY RELEASE: In consideration of allowing me/us to ride, visit, or use the facilities at CASCADE STABLES, INC (“Cascade Stables”), I/we agree to release Cascade Stables indemnify and hold it harmless from any liability, responsibility or damages, whether to me/us, or other persons or property, resulting from the conduct of any horse or other animal or any act or omission on Cascade Stable’s part from any accident, injury, illness, harm to me/us or any person, spectator or property, while I/we am/are engaging in a farm animal activity as defined in La. R.S. 9:2795.1A(1) or any horse related activity, including but not limited to picking hooves, turning out, medicating, mounting, dismounting, riding, grooming, tacking up, lunging, leading, jumping, pony parties, trail rides, training, transit or hauling to clinics/horse shows or performing any act whatsoever with or involving any horse or other animal.

I/we also understand and acknowledge the following warning:

WARNING

Under Louisiana law, a farm animal activity sponsor or farm animal sponsor professional is not liable for an injury to or the death of a participant in a farm animal activity. Activities resulting from the inherent risk of farm animal activity, pursuant to R.S.9:2795.1.

Signature: _____

(Major over 18 years of age, Pony Party Representative .)

Phone Number: (_____) _____ - _____