



**HORSEBACK RIDING LESSONS  
RELEASE FORM**

Rider's Name: (last) \_\_\_\_\_ (first) \_\_\_\_\_ DOB: \_\_\_\_\_

This is an agreement between \_\_\_\_\_ and Saddlebrook Ranch LLC, its instructors, managers, etc., that the person listed above will be responsible for \$\_\_\_\_\_ per month for a four week month and \$\_\_\_\_\_ per month for a five week month. Riding lessons will take place \_\_\_\_\_ times per week. Fees for lessons are due before student starts lessons and before the first of every month. Checks are made out to Saddlebrook and delivered to the student's instructor before the first of the month in order to book the student's same lesson time and day on the schedule. If not paid by the first, student will be taken off the schedule and will have to be rescheduled through Saddlebrook. Due to any kind of absences, no make-up lessons will be done after missed lesson day. Lessons will be held in all weather conditions. If lightning is present, student will receive a ground lesson. If lesson is cancelled, student will be contacted.

Rider Name: \_\_\_\_\_

Parent or Guardian Name: \_\_\_\_\_ Relationship to rider: \_\_\_\_\_

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

Hm: ( ) \_\_\_\_\_ Mb: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

Contact #1: \_\_\_\_\_ Relationship: \_\_\_\_\_

Hm: ( ) \_\_\_\_\_ Wk: ( ) \_\_\_\_\_ Mobile: ( ) \_\_\_\_\_

Contact #2: \_\_\_\_\_ Relationship: \_\_\_\_\_

Hm: ( ) \_\_\_\_\_ Wk: ( ) \_\_\_\_\_ Mobile: ( ) \_\_\_\_\_

Physician: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

Special Medical Needs (e.g. allergies, diabetic, special instructions for the attending physician): \_\_\_\_\_

Emergency Care Authorization Signature: \_\_\_\_\_

***You must give 48 hours notice via email for cancellation of lesson. If 48 hours notice is NOT given, you will forfeit that lesson and no refund will be credited. ALL make-ups are done Wed 3:30pm or Sat 1:00pm and must be completed within the month missed.***

X \_\_\_\_\_  
Initial

I understand that horseback riding is a high risk sport. I hereby release and hold harmless the instructors, trainers, employees, and owners of Saddlebrook Ranch LLC from all liability from accidents, damage, injury, or illness to horses, owners' employees, attendants, spectators, or any other persons or property. WARNING: Under Texas law (Chapter 87, Civil Practice and Remedies Code), an equine professional is not liable for an injury or the death of a participant in equine activities resulting from the inherent risks of equine activities.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Witness: \_\_\_\_\_

\*\*\*I have read and thoroughly understand the\*\*\*  
\*\*\*Saddlebrook Equestrian Center Rules & Safety Guidelines for lesson students.\*\*\*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Witness: \_\_\_\_\_

**OFFICE USE ONLY**

**Day:** Tu W Th F Sat      **Time:** \_\_\_\_\_      **Lesson Type:** Gr Semi Pri  
**Instructor:** \_\_\_\_\_      **Rider Level:** A or Y or C / W or E / 1 or 2 or 3      **Start Date:** \_\_\_\_\_