



Cavallo Dreams
 291 Mamaroneck Road
 Scarsdale, NY 10583
 (914) 725-3912
 CavalloDreamsFarm@gmail.com

Release Form

All Riding Is At Your Own Risk, Horses Can Be Dangerous And Unpredictable.

Rider Name: _____

Address: _____

Home Phone: _____ **Business/Cell Phone:** _____

E-Mail Address: _____ **Age:** _____

I agree to pay for the use of horse, equipment, premises and other facilities provided by Cavallo Dreams Farm LLC and its agents and employees, hereinafter referred to as Cavallo Dreams, at prices in effect on the date of use, for riding and/or instruction. I agree to obey the entire rules listed in the agreement and any other written or posted rules that may be enforced on the date of use. **I UNDERSTAND THAT RIDING IS AN INHERENTLY DANGEROUS ACTIVITY, AND I ASSUME THE RISK OF DAMAGE OR INJURY THAT MAY OCCUR.**

In consideration of the use of the horse, equipment, premises and facilities of Cavallo Dreams, I agree for myself and/or minor children or wards if any who may use Cavallo Dreams' horses or equipment, premises or facilities, to all risks and hazards of such use.

I hereby release Cavallo Dreams from, and I agree that Cavallo Dreams shall not be liable to me, my children, or any other person for any damage arising from personal injuries sustained by me, my children in or about Cavallo Dreams' premises, or on the streets, highways, or trails resulting from, or arising out of, my or my children's use, or intended use of Cavallo Dreams, and its officers, directors, employees, and agents from any claims for the negligence of any person present in or about Cavallo Dreams premises, in the streets, highways, or on the trails surrounding Cavallo Dreams. If any part of this agreement should be invalid; such parts shall be severed, and the rest of this agreement continue in effect. This agreement shall not be challenged orally. I have ridden _____ number of times.

- **Lessons are non-refundable.**
- **24-hour notice is required to cancel any lesson or you will be charged the full rate.**
- **We reserve the right to substitute instructors without notification.**
- **Hard hats and riding boots must be worn at all times while riding.**

Riders Signature: _____ Date: _____

Parent Signature (for minors): _____ Date: _____

Please Print Name: _____