

# M-BAR-C RANCH

## VOLUNTEER LIABILITY RELEASE

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

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In Case of Emergency Notify:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Emergency contact telephone number: \_\_\_\_\_

### Liability release and hold harmless

Whereas, the undersigned acknowledges the inherent risks involved in riding and working around horses, which risks include bodily injury from using, riding or being in close proximity to horses, among other risks, and further, that both horse and rider can be injured in normal use or in competition and schooling therefore in consideration of the privilege of riding and/or working around horses at the M Bar C Ranch, the undersigned does hereby agree to hold harmless and indemnity The Forgotten Children's Fund, M Bar C Ranch and it's directors, employees, and volunteers for accident, damage, injury or illness to the undersigned or undersigned minor child .

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

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature of Parent/Guardian (if under18) \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Print Name

