



PETER WEBER EQUESTRIAN CENTER'S

(BIRTHDAY PARTY / FIELD TRIP / PETTING ZOO / PONY RIDE)

RELEASE OF LIABILITY FORM – Signature of Parent/Guardian required for all participants

Name _____ Date _____

Address _____ City _____ Zip _____

Telephone # _____ Email _____

I have elected to have my child participate in the recreation activity stated above. In consideration for and as a condition of such participation, I agree to assume any and all risks arising out of or incident to such participation. I further agree to indemnify and hold harmless the City of Rolling Hills Estates and PWEC Enterprises, Inc. and their instructors, agents, officers and employees from any and all claims, damages, losses, expenses or any person, arising out of or incident to my child's participation in this recreation activity.

I hereby represent that I understand and am familiar with the nature of the activities in which he/she will participate in this recreation program, that he/she is in good physical health, and that he/she does not have physical or emotional conditions, past or present, of which I am aware, which would in any way affect his/her ability to participate in this activity.

UNDERSIGNED ACKNOWLEDGES THAT HORSEBACK RIDING, THE HANDLING OF A HORSE OR BEING IN CLOSE PROXIMITY TO A HORSE IS AN INHERENTLY DANGEROUS ACTIVITY AND INVOLVES RISKS THAT MAY CAUSE SERIOUS INJURY AND IN SOME CASES DEATH because NO horse is a completely SAFE horse.

Signature of Parent/Guardian

Participants' Names

For additional info, please call 310.541.9487 or email Doreen@pweccent.com.