

**RIDING AGREEMENT AND LIABILITY RELEASE FOR  
HUNGRY RUN STABLE  
9758 MOATE ROAD, DURAND, IL. 61024**

**PLEASE READ CAREFULLY BEFORE SIGNING  
SERIOUS INJURY MAY RESULT FROM THIS ACTIVITY. THIS STABLE DOES  
NOT GUARANTEE YOUR SAFETY.**

**RIDERS NAME:** \_\_\_\_\_ **AGE (IF UNDER 21)** \_\_\_\_\_ **RIDING EXPERIENCE**  
\_\_\_\_\_ **BEGINNER (UNDER 10 HRS)**  
\_\_\_\_\_ **OVER 10 HOURS**

**DOES THIS RIDER HAVE A PHYSICAL OR MENTAL CONDITION, WHICH MAY AFFECT HIS/HER SAFETY AND ABILITY TO RIDE OF WHICH WE NEED TO BE AWARE? IF YES, HOW CAN WE HELP WITH THIS NEED?**

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**SCOPE, TERRITORY AND DEFINITIONS:** This agreement shall be legally binding upon the registered rider and parent or legal guardian; and shall be interpreted according to the laws of the STATE OF ILLINIOS, WINNEBAGO COUNTY .and any dispute will be litigated in this county. If any clause or word is in conflict with state law, that single part is null and void. The term " **Horse** "herein refers to all equine species. The term "**Horseback Riding**" herein refers to riding or otherwise handling of horses, whether from the ground or mounted. The term "**Rider**" herein refers to a person who rides mounted or otherwise handles or comes near a horse from the ground.

**ACTIVITY RISK:** I understand that horseback riding is classified as RUGGED ADVENTURE RECREATIONAL SPORTS ACTIVITY, and that there are numerous obvious and non-obvious inherent risks always present in such activity despite all safety precautions.

**NATURE OF STABLE HORSES:** I understand that **HUNGRY RUN STABLE** chooses its horses for their calm dispositions and sound basic training as is required for use as riding horses for novice and beginning riders, and this stable follows a riding risk reduction program. Yet no horse is completely safe. Horses are 5 to 15 times larger, 20 to 40 times stronger and 3 to 4 times faster than humans. If a rider falls from horse to ground it will generally be at a distance of from 3½ to 5½ feet and the impact may result in injury to the rider. Horseback riding is the only sport where one smaller, weaker predator animal(human) tries to impose its will on another much larger, stronger prey animal with a mind of its own and each has limited understanding of the other. If a horse is frightened or provoked it may divert from its training and act according to its natural survival instincts which may include, but not limited to; Stopping short, Changing directions or speed at will; Shifting its weight; Bucking, Rearing, Kicking, Biting, or Running from danger.

**RIDER RESPONSIBILITY:** I understand that upon mounting a horse and taking up the reins the rider is in primary control of the horse. The rider's safety largely depends upon his/her ability to carry out simple instructions, and the ability to remain balanced aboard the moving animal. I agree that the rider shall be responsible for his/her own safety.

**CONDITIONS OF NATURE:** I understand that **Hungry Run Stable** is NOT responsible for total or partial acts, occurrences, or elements of nature that can scare a horse, cause it to fall or react in an unsafe way. EXAMPLES: Thunder, lightning, hail, wind, water, wild or domestic animals, insects, or reptiles that may come near or bite or sting horse or person; and irregular footing on out of door groomed or wild land which is subject to constant change in condition according to weather, temperature, and natural and man-made changes in landscape.

**SADDLE GIRTHS-NATURAL LOOSENING:**I understand that saddle girths may loosen during a ride. If a rider notices this he/she must alert the nearest staff member as quickly as possible so action can be taken to avoid slippage of saddle and a fall from the animal.

**PROTECTIVE HEADGEAR OFFERING:** I, or my child and/or legal ward, have been offered a SEI CERTIFIED ASTM STANDARD Equestrian Helmet by this stable and do understand that wearing this while mounted, riding, dismounting and otherwise being around horses, may prevent or reduce severity of some head injuries and possibly prevent the wearer's death as the result of a fall and other occurrences. It is understood that the STABLE PROVIDED protective headgear may not be of perfect fit for each rider's head, and that once provided I/WE will be responsible for securing the helmet on this rider's head at all times.

**ACCIDENTAL/MEDICAL INSURANCE:**I AGREE that should emergency medical treatment be required, I and/or my accident/medical insurance company **shall pay for ALL** such incurred expenses. My accident/medical insurance

company is \_\_\_\_\_

and my policy number is \_\_\_\_\_.

**LIABILITY RELEASE: I agree that:** In consideration of **HUNGRY RUN STABLE** allowing my participation in this activity, under the terms set forth herein, I, the rider, for myself and on behalf on my child and/or legal ward, do agree to hold harmless, release, and discharge **HUNGRY RUN STABLE and STAFF**, owner of property, Andria Wekenmann, or owner of horse if not owned by stable, of and from all claims, demands, cause of action and legal liability, whether the same be known or unknown, anticipated or unanticipated, due to ordinary negligence: and I do further agree that except in the event of gross negligence and willful and deficient misconduct of stable or staff, I shall nor bring any claims, demands, legal actions and causes of action, against this stable and staff as stated above in this clause, for any economic and non-economic losses due to bodily injury, death, property damage, sustained by me and/or my minor child and/or legal ward in relation to the premises and operations of This stable to include while riding, handling, or otherwise being near horses owned by or in care, custody and control of **HUNGRY RUN STABLE**, whether on or off the premises of the stable.

**All Riders and Parents or Legal Guardians must sign below after reading this entire document. Each spouse must sign:**

**SIGNER STATEMENT OF AWARENESS:** I/We the undersigned, have read and do understand the forgoing agreement, warnings, release and assumption of risk. I/We further attest that all facts relating to the applicant's physical condition, experience, and age are true and accurate.

**SIGNATURE OF RIDER** \_\_\_\_\_ **DATE** \_\_\_\_\_

**SIGNATURE OF PARENT/ GUARDIAN** \_\_\_\_\_ **DATE** \_\_\_\_\_

**SIGNATURE OF PARENT/GUARDIAN** \_\_\_\_\_ **DATE** \_\_\_\_\_

**ADDRESS in full:** \_\_\_\_\_

**HOME PHONE** \_\_\_\_\_

**BUSSINESS PHONE** \_\_\_\_\_

**EMERGENCY CONTACT** \_\_\_\_\_

**EMERGENCY PHONE** \_\_\_\_\_