



www.woodlandstrailriding.com.au

Waiver Form for Horse Riding, Horse Related and Service Provider Activities

As a condition to my acceptance of service or participation, I hereby acknowledge that I agree to participate at my own risk and that I am aware that all horse activities carry an element of hazard and risk of injury to both horse, rider, service provider and the general public. I am aware that Woodlands Trail Riding, servants, agents, representatives and volunteers accept no responsibility or liability for any injury or loss that I may sustain as a direct or indirect consequence of my service or participation in horse riding or horse related activities, irrespective of whether a sustained injury is a direct/indirect result of Woodlands Trail Riding, servant, agent, representative or volunteer. Except in regards to any rights I may have arising under the Trade Practices Act 1974.

I acknowledge that all safety precautions undertaken are a service to me, but are not a guarantee of safety. I understand that horses are unpredictable by nature, that when frightened their instincts are to jump forward or sideways, to run away from danger, to kick, to rear up, buck or to bite. I declare that I am in sound condition and undertake participation with the knowledge of the physical demands required. I consent to receiving any medical treatment, including ambulance attendance where Woodlands Trail Riding deems fit during or after participation.

RIDER'S, HORSE HANDLING OR SERVICE PROVIDER DUTIES:

1. I agree to participate in riding, horse handling or service provider duties at my own risk.
2. I agree that I will not ride, handle a horse or provide a service if I exceed the legal limit for alcohol and/or under the influence of drugs.
3. If riding, I understand that Woodlands Trail Riding, servants, agents, representatives or volunteers may inspect the riding equipment as part of their due diligence. I also agree that I will be ultimately responsible for checking all my equipment. Should I have any concerns I will tell a staff member immediately.
4. I agree to following all Woodlands Trail Riding employees, servants, agents, representatives and volunteers instructions at all times.
5. I agree that as a condition of riding I must wear an Australian Standards riding helmet and closed toe appropriate footwear.
6. I agree that I will be responsible for any injuries to the horses, damages to the premises, property owned by others, injuries to any riders or pedestrians which I may cause by negligence, reckless or irresponsible conduct.

7. I will report any accident, injuries, loss or damaged property prior to leaving the Woodlands Trail Riding Pty. Ltd operator location, at Woodlands Historic Park, Somerton Road, Greenvale, Victoria.
8. All minors under the age of 18 must have a parent or guardian to consent and sign this acknowledgement form, indemnifying them.

Name of Rider/Horse Handler/Service Provider.....
I have read the Waiver form for Horse Riding, Horse Related and Service Provider Activities and hereby consent to these terms and conditions of participation:

Signed.....

Full Name (print).....

Date.....

Rider Information:

First and Last Name.....

Approximate Height

Approximate Weight.....

Riding Competency (beginner, intermediate, advanced)

Any special needs requirements?.....