**Nicole’s Riding Lessons at Poplar Ford Farm  
Client Information/Participation Liability Waiver**

I, the undersigned, do hereby sign the following representation, assumption of risk and release agreement in consideration of being permitted to horseback ride on and to use for other permitted purposes on our property, facilities and horses associated with **Nicole’s Riding Lessons** located at 5555 Old Farm Lane, Manassas, VA 20109.

This form must be completed by and for each individual who wishes to participate in mounted or dismounted activities at **Nicole’s Riding Lessons**.   
  
Please read this form in its entirety before signing, as we cannot guarantee your safety, and serious injury can result from participation in equestrian activities.

**CLIENT INFORMATION:**

Rider/Participant Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birthday:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approximate Weight and Height: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant’s Mobile Number (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If Under 18, Parent’s Name(s) and Mobile Number(s):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rider and/or Parent Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Name & Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does the rider have any physical or mental health conditions which might affect his/her ability to participate in equine

sports?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, please describe:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**LIABILITY RELEASE:**I hereby certify that I fully understand that horseback riding and the handling of horses is inherently dangerous to participants and/or spectators and that there is serious possibility that I may suffer injury or death as a result of participation. I hereby state that I have been given notice of the risks of equine activities pursuant to **section 3.1-796.132 of the Code of Virginia, 1950** amended, including but not limited to:

\* The propensity of an equine to behave in dangerous ways which may result in injury to the participant:

\* The inability to predict an equine’s reaction to sound, movement, objects, person or animals; and

\* Hazards of surface or subsurface conditions.

**I expressly agree to assume all of the above described risks and all other risks of equine activities.**

I AGREE THAT: In consideration of **Nicole’s Riding Lessons** allowing my participation in this activity, under the terms set forth herein, I, the rider, and the parent or guardian thereof if a minor, do agree to hold harmless and release **Nicole’s Riding Lessons**, its owners, agents, employees, contract laborers, officers, members, premises owners, affiliated organizations, and insurers from any legal liability. I shall bring no claims, demands, actions and causes of action and/or litigation against **Nicole’s Riding Lessons** and ITS ASSOCIATES as stated above in this clause, for any economic and/or non-economic losses due to bodily injury, death, property damage, sustained by me and/or my minor child or legal ward in relation to the premises and operations of **Nicole’s Riding Lessons** to include while riding, handling, or otherwise being near horses owned by or in the care, custody and control of **Nicole’s Riding Lessons**.

I also waive any and all claims, action, causes of action or demand that I or my heirs may now have or which arise in the furture, and further covenant that neither I or my heirs will sue **Nicole’s Riding Lessons** and ITS ASSOCIATES as stated above in this clause, for any personal injury, property damage or claims resulting from any horseback riding on or otherwise using the above described property, facilities and horses. I acknowledge and accept that all terms of this agreement extend to my heirs and family.  
  
In accordance with the Virginia State Legislature Equine Activity Liability Act, Title 3.2, including all but not limited to section 3.2- 6200, et seq. of the Code of Virginia 1950, as amended. In signing this agreement, I knowingly execute a waiver of my rights to sue and assumes all risks specifically enumerated under the equine activity liability act. I waive the right to maintain any action against stable, its owners, officers, managers, agents, employees, horse owners, or anyone at stable. I acknowledge that equine activities are inherently dangerous, including but not limited to the propensity of an equine to behave in dangerous ways that may result in injury to me. It is impossible to predict an equine's reaction to sounds, movements, objects, persons or animals. Hazards of surface or subsurface conditions may be encountered.

**ACKNOWLEDGMENT OF RULES/POLICIES:**

1. I agree at all times to comply with Nicole’s Riding Lessons rules. I take full responsibility of my guests while they are on property and agree that they will follow the rules as well.
2. I agree to use an ASTM/SEI certified riding helmet at all times while riding on premises.
3. **CANCELLATION POLICY**: Nicole’s Riding Lessons reserves the right to cancel based on weather conditions or any other conflicts. You will be notified in a timely manner and not charged for cancellationsdirected by NRL. If you, as the participant, choose to cancel your appointment/lesson at any time, you must notify NRL within 24 hours before your appointment/lesson time. Otherwise, you will be charged the full cost of the lesson.
4. Payments may be made via check, cash, or electronically via Paypal or Venmo.

**SIGNER STATEMENT OF AWARENESS:**I/WE, the undersigned, have read and do understand this full agreement, warnings release and assumption of risk. I/WE further attest that all statements relating to the applicant's physical condition, experience level and relationship to parent or guardian are in fact true and accurate.

Participant Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature (if under 18): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_