The Riding Stable
3912 Nimtz Pkwy, South Bend, In 46628
574-514-0904

Release

Release executed on_____, _____

By_____ (your name)

Of_____ (address of above)

City of_____, County of_____, State of _____
Herein referred to as releaser, to The Riding Stable, 3912 Nimtz Pkwy, South Bend, In, County of St. Joseph, State of Indiana, herein referred to as releasee.

I, releaser, being of lawful age in consideration of being permitted to participate in all horseback riding activities including by not limited to: riding lessons, trail rides, stall cleaning, feeding, grooming, trailering of horses and leisure riding, do for myself, my heirs, executors, administrators, and assigns, hereby release and forever discharge The Riding Stable, its officers and members of and from any and every claim, demand, action or right of action, of whatever kind or nature, either in law or in equity arising from or by reason of any bodily injury or personal injuries known or unknown, death or property damage resulting from any accident which may occur as a result of participation in the above cited horseback riding activities, whether by negligence or not.

Releaser agrees to indemnify the release from any loss, liability, damage or cost they may incur due to the presence of releaser in or upon the premises owned or leased by The Riding Stable, whether caused by the negligence of the releasee or otherwise.

This release contains the entire agreement between the parties hereto and the terms of this release are contractual and mot mere recital.

Releaser further states that he has carefully read the foregoing release and knows the *contents thereof and signs this release as his own free act.*

In witness whereof, releaser has executed this release at_____
_____ (designated place of execution if different than above) the day and year first above written. This will remain effective from this day until the last day of the calendar year.

Signature of Releaser: _____