

“RELEASE FORM”

Estremado Arena
Estremado & Sons, Inc.
2585 Galls Creek Rd.
Gold Hill, OR 97525
Phone (541) 855-1004

I, _____ will not hold Estremado & Sons Inc., Joyce Estremado, Tony Estremado, Julie Estremado, or any of it’s associates, responsible for any accidents, injuries, damages, theft, or any liabilities of any kind that might occur while I am on the premises of the Estremado & Sons Inc. I will take full responsibility for all of my actions while riding and when I enter the premises, I will be at my own risk.

All activities on these grounds are subject to the Equine Inherent Risk Law ORS 30.687 – 30.697.

BY YOUR PRESENCE ON THESE GROUNDS, you have indicated that you have accepted the limits of liability, resulting from inherent risks of Equine Activities.

AMBULANCE RESPONSE

In the event I (named above) am required to have an ambulance called, due to an injury, **I shall be responsible for any costs for the emergency services.** I shall not hold the Estremados or anyone affiliated with the Estremados responsible for any costs occurred by the emergency services. If I cannot give consent to call 911 for emergency services and the management deems it necessary, the patient is still held responsible.

***(Check box if minor child)**

Date: _____

Signed: _____

*Parent: _____

Mailing Address: _____

STREET

CITY STATE ZIPCODE Phone #: _____

EMAIL: _____