



**PAL STABLES**

**RIDING ACKNOWLEDGMENT AND RELEASE**

**SAFETY HELMET/PROTECTIVE HEADGEAR STATEMENT**

I, for myself and on behalf of, my child and/or legal ward, have been fully warned and advised that I should wear a properly fitting and secured ASTM/SEI-certified equestrian helmet while riding or near horses in order to reduce the severity of some head injuries and possibly prevent death from happening as the result of a fall or other occurrences.

**MICHIGAN EQUINE ACTIVITY LIABILITY ACT**

Under the Michigan equine activity liability act, an equine professional is not liable for an injury to or the death of a participant in an equine activity resulting from an inherent risk of the equine activity.

**PAL STABLES**

I, for myself and on behalf of, my child and/or legal ward, will not hold PAL STABLES responsible for any loss or damage that may occur to horse, equipment or individuals participating in the riding and I (We) will not make any claim therefore.

**RIDER**

NAME: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY,STATE,ZIP: \_\_\_\_\_

AC/PHONE: \_\_\_\_\_

PRINT: \_\_\_\_\_  
(PARENT/GUARDIAN)

SIGNATURE: \_\_\_\_\_  
(PARENT/GUARDIAN)

EMAIL: \_\_\_\_\_

BIRTHDAY: \_\_\_\_\_  
(RIDER)

DATE: \_\_\_\_\_