



Sonya Dodginghorse
53 Cattle Dip Road, Tsuut'ina AB, T3T 0A8
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DH RANCH

Release and Waiver for Dodginghorse Ranch

I, the undersigned, hereby acknowledge that equine events in which I am participating are inherently dangerous and involve risk of injury or even death. I further acknowledge and agree that such risks cannot be eliminated by the equine operators' reasonable efforts and precautions. Therefore, I fully accept and assume exclusive liability for the risks involved in the events which I have elected to participate.

I further agree that I will abide by all rules and regulations of the Tsuut'ina Nation, Dodginghorse Ranch, and Dodginghorse Equine Assisted Learning. (collectively referred to as the "Parties").

I hereby release the Parties and all individuals working with or for the Parties, including, and without limiting, all members, stock contractors, employees or agents, from and waive any claim for damages to property, injury or death or other claims of any kind which I might have related to my participation in activities at Dodginghorse Ranch.

I have read and I understand this release and waiver. I understand that by signing it I am giving up the right to claim that any of the Parties are responsible for any damage to property, injury or death which might result from my attendance at or participation in activities at the Dodginghorse Ranch.

I agree to indemnify and save harmless the Parties and all individuals working with or for the Parties from any and all claims, demands, actions or causes of actions, which may be brought against or suffered by any one of the Parties or individuals working with or for the Parties arising out of or in any way related to my participation in the activities at the Dodginghorse Ranch.

Under 18 years of age:

Allergies: _____

Child's Name: _____ Birthday: _____

Date: _____ Parent/Guardian Signature: _____

Print Name Parent/Guardian: _____ Emergency #: _____

Telephone: _____ Email: _____

Address: _____

Participants over 18 years of age:

Allergies: _____

Participant Name: _____ Signature: _____

Telephone: _____ Email: _____

Address: _____

PHOTOGRAPHS

I understand any related photographs may be used for Dodginghorse Ranch publication without my written consent.

Print Name: _____ Signature: _____ Date: _____

*** Please Fill out the Online Covid Screening Form on the Website on the day of your Service under Forms: [Forms | DH RANCH \(dhranch44.com\)](#)**