

Pippa Hattan Equestrian

B.H.S.I. Registered
International Equestrian
Passport Level 3



Release and Indemnity Form

For Participants aged under 16 years

My child/ward, _____ wishes to participate in horse riding activities facilitated and/or provided by Pippa Hattan BHSI. In consideration of the Pippa Hattan providing my child/ward with coaching and tuition to enable me to participate in horse riding and horse/pony related activities, I acknowledge and agree on behalf of myself and my child/ward as follows:

I understand that riding is a risk sport and participation may hold potential danger and that all horses and ponies may react unpredictably on occasion. I understand that there are risks and dangers involved in horse riding and that my child/ward's participation in horse/pony riding and related activities may result in damage to personal property, my horse/pony, illness, personal injury or death. These risks and dangers may be caused by my child/ward, by my horse/pony, or other participants, or by accidents, or by the forces of nature, or by other causes. These risks and dangers may arise from foreseeable or unforeseeable circumstances. I hereby knowingly and voluntarily, on behalf of myself and my child/ward, and my horse/pony, accept and assume these risks and dangers.

I understand that my child/ward must be in good physical condition and in good health to participate in horse riding and related activities, and I hereby confirm that my child/ward is in good physical health. I also confirm that my child/ward has no known physical disabilities or health problems that may present a risk or danger if he/she participates in horse riding and related activities.

I, on my own behalf, and on behalf of my child/ward and our respective personal representatives, executors, administrators, heirs, successors and assigns, hereby release, indemnity and hold harmless Pippa Hattan and agents from any and all losses, liabilities, damages, obligations, claims or demands of whatever nature for any injuries, damage, losses, liabilities, costs, fees, claims or demands of whatever nature incurred or sustained by me, my child/ward, horse/pony or others during the course of, as a result of, or in connection with my child/ward participating in horse riding or related activities with Pippa Hattan

I confirm that I have read and understood the above terms and that, by signing below, I agree to those terms.

Signature of parent/guardian

Name of parent/guardian

Date:

email: pippahattan@yahoo.com | tel: 07887 771685