

## Liability Release Form

To: Alps Court Equestrian Leisure, Alps Court, Wenvoe, Cardiff, CF5 6AA

Event or Activity .....

Date of Event or Activity .....

Participant .....

I understand that participation in the above event or activity could include actions or tasks which might be hazardous to the participant named above.

By signing below, I assume any risk of harm or injury which might occur to the participant due to his/her/my participation in the event or activity. I release the organization or business named above from all liability, costs and damages which might arise from participation in the above named event or activity.

If the participant is a minor, I agree that the minor has my consent to participate in the event. I further provide my consent for the organization or business named above to seek emergency treatment for the minor if necessary. I agree to accept financial responsibility for the costs related to this emergency treatment.

Sign here if the participant is an Adult

.....  
Signature of participant    Date

Sign here if the participant is a Minor

.....  
Signature of parent or guardian    Date

.....  
Print name of parent or guardian