RELEASE AND INDEMNIFICATION AGREEMENT

	(hereinafter ca	alled "I," "me," "my," and	d "myself")
I live at:(Street Addre	ess) (City, Stat	to 7ID)	
		,	
Phone number:	Email address:		
writing from CHILD'S parent	lian of the child name If I am not the parent or gua or guardian to execute this release of the control	on behalf of CHILD'S	parent or guardian. I
discharge Bear Creek Stables the direction of Bear Creek S expense, or claim resulting from	and our heirs, executors, administrators, Inc., its officers, employees, agents, an stables, Inc. its officers, employees, or a many injury to me or to my CHILD, or pr swimming, riding horses, competing, sp. Inc.	nd the owner or owners agents from any liabili operty of either of us, t	s of any horse ridden at ty, loss, damage, cost, hat may result from any
expense, or cost whatsoever	Stables, Inc., its officers, employees, or on account of first aid or medical treatm ion by me in any activity at Bear Creek St	ent or service rendere	
	ces provided by Bear Creek Stables, Ir e full financial responsibility for any and ty at Bear Creek Stables, Inc.		
employees, other customers, t	s under this agreement, I agree to defend the owner of any horse ridden at the dire sors, and each of them against all suits, Creek Stables, Inc.	ection of Bear Creek S	Stables, Inc., its officers,
PROFESSIONAL IS NOT LI	LAW (CHAPTER 87, CIVIL PRACTION ABLE FOR AN INJURY TO OR THE DIGHT THE INHERENT RISKS OF EQUINE	DEATH OF A PAR	
I have read and foregoing and Signed this the day of	understand its contents, 20 in MAI	NCHACA, TRAVIS, TX	<u> </u>
(Signature of Parent or lega	al guardian)		
	TO BEFORE ME THE day of (parent's or guardian's name) (Notary Public, State of Texas) (Printed name of Notary Public)	, 20, b	y a person known to be
My commission expires:			
EXCHANGE FOR PARTICIF	ING LEGAL DOCUMENT. YOU ARE CPATING IN ACTIVITIES AT BEAR CS, CONSULT WITH AN ATTORNEY <u>BE</u>	REEK STABLES, IN	C. IF YOU DO NOT
Instructor's Name	Class name (circle)	Day	Time
	WEBIA		