

# Western Sky Horsemanship

Dale Rumens-Partee

817 181<sup>st</sup> AVE NE • Snohomish, WA • 98290  
(425)-334-5108 or cell (425)-319-9280

I, \_\_\_\_\_, HEREBY ACKNOWLEDGE that I have voluntarily elected to participate in instruction, care, handling, training and riding of horses with Dale D. Rumens-Partee, and said instruction and training to take place at such locations and facilities as designated by Dale D. Rumens-Partee.

I AM AWARE THAT ACTIVITIES INVOLVING HORSES CAN BE HAZARDOUS, AND I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH THE KNOWLEDGE OF THE DANGER INVOLVED AND HEREBY AGREE TO ACCEPT ANY AND ALL RISKS OF INJURY OR DEATH.

### Release and Hold Harmless Agreement:

The undersigned assumes the unavoidable risks inherent in all horse-related activities, including, but not limited to, bodily injury and physical harm to horse, rider and spectator.

In consideration therefore, and for the privilege of riding and/or working around horses located at various facilities, the undersigned does hereby agree to hold harmless and indemnify Western Sky Horsemanship, Dale Rumens-Partee, and any of the aforementioned's owners, employees, agents, or assigns, and further release them from any liability or responsibility for any accident, damage, injury or illness to the undersigned or to any horse owned or leased by the undersigned or to any family member spectator accompanying the undersigned on the premises at the various instruction locations. **Int:** \_\_\_\_\_

I HEREBY RELEASE, WAVE, DISCHARGE, AND COVENANT NOT TO SUE DALE D RUMENS-PARTEE AND/OR each and every person who, from time to time may be selected by DALE D RUMENS-PARTEE to assist her, and \_\_\_\_\_, all for the purposes herein referred to as "Releasees," from all liability to myself, my legal representatives, distributees, guardians, assigns, heirs, and next of kin, all for the purposes herein referred to as "Releasers," for injury, death, or damage resulting from my participation in said instruction and training as a result of the negligence of "Releasees", or any employee, servant, agent, or contractor of "Releasees". I FURTHER RELEASE AND DISCHARGE "Releasees" from all actions, claims or demands "Releasers" now have or may hereafter have for injury, death or damage resulting from participation in such activities. **Int:** \_\_\_\_\_

I HEREBY AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS Releasees, and each of them, from any loss, liability, damage, or cost they, or any of them, may incur due to my participation in said instruction and training. **Int:** \_\_\_\_\_

I HEREBY ASSUME FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE, due to the negligence of Releasees, or any of them or of any employee, servant, contractor of Releasees resulting from my participation in said instruction and training. **Int:** \_\_\_\_\_

I EXPRESSLY ACKNOWLEDGE AND AGREE THAT activities involving horses are very dangerous and involve the risk of serious injury and/or death and/or property damage. I FURTHER EXPRESSLY AGREE THAT the foregoing release, assumption of the risk and indemnity agreement is intended to be as broad and inclusive as is permitted by the laws of the State of WA. and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continued in full and legal force and effect. **Int:** \_\_\_\_\_

PROACTIVE ATTIRE: I am hereby advised that it is strongly recommended that I should wear pull on heeled boots to protect feet when working around or riding horses. I am hereby informed that I must wear a well fitted hard hat, or ASTM or SEI approved helmet, fastened securely under the chin, while riding and working around horses if I am under the age of 18 years. If I am 18 years or older and I choose not to wear the helmet as advised I must Print as required below.:

(Print above: "I choose not to wear a helmet when riding though I have been advised to do so")

I HAVE CAREFULLY READ THIS RELEASE AND ASSUMPTION OF THE RISK AND INDEMNITY AGREEMENT AND FULLY UNDERSTAND IT'S CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND WESTERN SKY HORSEMANSHIP/DALE D RUMENS-PARTEE AND I SIGN IT OF MY OWN FREE WILL AND FURTHER AGREE THAT NO ORAL REPRESENTATIONS, STATEMENT OR INDUCEMENTS APART FORM THE FOREGOING WRITTEN AGREEMENT HAVE BEEN MADE.

I HAVE READ THIS DOCUMENT. I UNDERSTAND IT IS A RELEASE OF ALL CLAIMS. I UNDERSTAND AND ASSUME ALL RISKS INHEREND IN ACTIVITIES WITH HORSES. I VOLUNTARILY SIGN MY NAME EVIDENCING MY ACCEPPTANCE OF THE ABOVE PROVISIONS.

\_\_\_\_\_: \_\_\_\_\_  
Date: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Signature (Parent's signature if under age 18)  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ email \_\_\_\_\_  
Telephone w/ Area Code: \_\_\_\_\_ ER Contact & Phone #: \_\_\_\_\_

# Western Sky Horsemanship

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817 181<sup>st</sup> AVE NE • Snohomish, WA • 98290  
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### Please complete the following:

Horse's Name: \_\_\_\_\_ Breed: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

List any problems or concerns you have with your equine partnership:

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Lesson Notes:

Date: Lesson # 1 \_\_\_\_\_

Date: Lesson # 2 \_\_\_\_\_

Date: Lesson # 3 \_\_\_\_\_

Date: Lesson # 4 \_\_\_\_\_

Date: Lesson # 5 \_\_\_\_\_

Date: Lesson # 6 \_\_\_\_\_

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