



H.O.P.E. at River Trot Farm

Equine Assisted Therapy & Learning

Client Contact Information & Release of Liability Agreement

Client Name: _____ DOB: _____ Age: _____

Parent/Guardian Name (if minor): _____

Address: _____

Phone: Home& Cell: _____ Email: _____

Consent and Waiver of Liability:

I hereby request that the client/participant named above be accepted into the H.O.P.E Equine Assisted Therapy and Learning at RiverTrot Farm. H.O.P.E. is operated by Kendra Twitty, MA, LPC, EAGALA Certified and trained in Natural Lifemanship. I acknowledge that a representative of H.O.P.E has fully explained to me the scope of equine-assisted therapy & learning programs including the potential for injury, which can occur from riding horses, caring for horses, or being involved in therapeutic/learning activities that include horses. Because of the potential benefits of the equine assisted therapy & learning program, I hereby waive any claim, which I or the client may have against Kendra Twitty, River Trot Farm LLC, H.O.P.E. and their employees or contract personnel arising out of any injury, which the client may sustain while involved with this program.

The undersigned assumes the unavoidable risk inherent in all horse-related activities, including but not limited to bodily injury and physical harm to horse, rider, and spectator. In consideration, therefore, for the privilege of riding and/or working and/or participating in activities around horses at River Trot Farm LLC, and H.O.P.E, located at 766 Etheridge Road, Yemassee SC, I hereby agree to hold harmless and indemnify River Trot Farm LLC ,Kendra Twitty, H.O.P.E and their employees, volunteers, sponsors, and contract personnel and further release them from any liability for the undersigned or to any family member or spectator accompanying the Undersigned on the premises. By signing below, I acknowledge that I enter into this release after having read the same, and place my signature hereto of my own free voluntary act and deed. By signing below, I represent to River Trot Farm LLC, Kendra Twitty, and H.O.P.E. that I fully understand its contents that I do not need any further explanation, and I waive any further explanation.

I AGREE to assume all risks of Harm to me and/or my child, and specifically agree to the South Carolina Liability Law regarding equine activity liability. **Under SC Law, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in an equine activity resulting from an inherent risk of equine activity, Pursuant to Article 7, Chapter 9 of Title 47, Code of Laws of South Carolina, 1976.**

Signature _____ Date _____