



**STUDENT INFORMATION**

**Students Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Address, City, State, Zip:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**If Rider is Under 21**

**Guardian 1 name:** \_\_\_\_\_ **Phone number:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_ **Cell phone:** \_\_\_\_\_

**Guardian 2 name:** \_\_\_\_\_ **Phone number:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_ **Cell phone:** \_\_\_\_\_

**Emergency Contact Person:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Medical Insurance Company:** \_\_\_\_\_ **Policy Number:** \_\_\_\_\_

**Is student currently taking lessons:** \_\_\_\_\_ **What type of lessons:** \_\_\_\_\_

**Briefly describe your riding experience and what you would like to accomplish in your riding lessons:**

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**Please list all medical, physical or psychological conditions that may restrict your ability to do a physical outdoor activity, such as horseback riding:** \_\_\_\_\_

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**I have received, read and understand a copy of the HVF student rules and agree to abide by these rules.**

**Signature of Student (or guardian if student is under21)** \_\_\_\_\_ **Date:** \_\_\_\_\_

# HIGH VIEW FARM

## Student Rules

1. An ASTM/SEI approved riding helmet must be worn at all times when mounted. New students may borrow a High View Farm riding helmet during the first six lessons; however, it is expected that you have your own helmet for all lessons after that. Ask Carol or your instructor where you may purchase one. If you forget your helmet you may borrow one if one is available. **NO BICYCLE HELMETS ALLOWED.** No helmet = no riding.
2. Mount in the center of the ring, well away from other horses, unless otherwise instructed.
3. It is suggested that you arrive 30 minutes ahead of your scheduled lesson time in order to groom and tack the horse so that you will be well prepared when your lesson begins.
4. Lessons will not run overtime because of late arrivals. You will be allowed to ride if arriving late, but you cannot ride beyond the originally scheduled lesson time.
5. Parking is available in the trailer area along the side of the driveway to the barn. If the entrance to this driveway is roped off, or the parking area is full, then you may park in the driveway next to the house. No vehicles are allowed beyond the house or beyond the parking lot.
6. **No horses are allowed on the grass;** please use the driveway and paths.
7. **No one is allowed inside the barns except staff and students.** Please keep children away from all areas where horses are turned out; the fences are **ELECTRIC.**
8. For the sake of those riding, please do not allow visiting children to play near the arena; they may play in the back fields. If parents, visitors, and children wish to watch the lessons near the arena, they may do so quietly. **Please do not talk to your child while they are in the lesson.**
9. **NO ONE BUT STUDENTS AND INSTRUCTORS ARE ALLOWED IN THE ARENA.**
10. **NO SMOKING** anywhere except inside your car.
11. If you wish to give horses a snack, please get permission from your instructor first.
12. In case of questionable weather, please call or text Carol or your instructor. Students will be notified if a decision is made to cancel lessons.
13. Payment is expected at the start of each lesson. If a student arrives without payment he/she will be allowed to ride after signing a promissory note and that payment is expected within one week. No further lessons will be given until the prior balance is received.
14. In the event that a student cannot attend lessons 24 hours notice is expected. If notice is not received you will be billed for that lesson. **Please make every effort to attend lessons as scheduled as instructors have set aside their time to be available to you and need to be compensated for that time. When we receive ample notice it allows us to offer make-up lessons to others.**

# HIGH VIEW FARM RELEASE AND HOLD HARMLESS AGREEMENT

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ Email Address: \_\_\_\_\_

## ACKNOWLEDGEMENT OF RISK

1. I, \_\_\_\_\_, the undersigned have read and understand, and freely and voluntarily enter into this Release and Hold Harmless Agreement with Carol and Scott Mayer, and their agents and employees, dba High View Farm, understanding that this Release and Hold Harmless Agreement is a waiver of any and all liability(ies).

2. I understand the potential dangers that I could incur in mounting, riding, walking, boarding, feeding said horse; including, but not limited to, any interactions with other horses and dogs. Understanding those risks I hereby release that Company, its officers, directors, shareholders, employees and anyone else directly or indirectly connected with that Company from any liability whatsoever in the event of injury or damage of any nature (or perhaps even death) to me or anyone else caused by or incidental to my electing to mount and ride a horse, or be a spectator at such event, at High View Farm.

3. I understand that there are risks inherent in dealing with equines (including horses, ponies, mules, donkeys, and hinnies) as itemized above.

4. I understand and recognize and warrant that this Release and Hold Harmless Agreement, is being voluntarily and intentionally signed and agreed to, and that in signing this Release and Hold Harmless Agreement I know and understand that this Agreement may further limit the liability of equine professionals to include any activity, whatsoever, involving an equine, including death, personal injury and/or damage to property.

5. I recognize and agree that I know which equine professional(s) I will be working with, and acknowledge that I agree said equine professional(s) has/have made reasonable and prudent efforts to determine my ability to engage in the equine activity, and has/have sufficient knowledge of my equine and horseback riding skills.

NOTICE: Wearing an ASTM/SEI approved hard hat is **REQUIRED** while riding.

I, \_\_\_\_\_, acknowledge that I have read the above statements and definitions, and hereby indemnify and hold harmless, **High View Farm**, and its employees or owners from any liability arising from accident, injury, theft, or damages to myself, my representatives, and helpers, all equipment and property, and all animals under my jurisdiction. I have received a copy of **High View Farm's Rules** and will adhere to them strictly. This agreement shall continue for each and every visit **High View Farm's** property.

High View Farm, 150 Tower Hill Road, Cumberland RI, 0286  
401-333-0056  
carolmayer24@yahoo.com  
ridinglessons.com

Participant agrees that Participant has been given sufficient time to read, and understand, and ask questions, if any, concerning the nature and scope of this Voluntary Waiver Agreement.

The terms of this release form shall be construed as the entire agreement and may not be altered, amended, or modified except in writing and signed by both parties. The terms of this release shall be governed by the laws of the State of Rhode Island.

In addition, I, \_\_\_\_\_, (student/rider above named for, if minor, parents/guardians) hereby grant permission and authority to High View Farm, its officers and authorized employees to act for us in executing verbal instructions of if unable to contact us, to act for us in dealing with physicians, available ambulance companies and hospitals, to obtain prompt medical attention for the participant named above in the event of any perceived medical emergency. I hereby covenant and agree to release **High View Farm**, it's officers, agents and employees, and owners of any property concerned, and hold harmless from liability for any injury or damage which the rider may sustain while at High View Farm or participating in any activity sponsored by High View Farm, and from any liability connected with obtaining prompt medical attention for the rider named above.

**MINORS:**

The undersigned declares that the undersigned is the parent or legal guardian of the minor named below. The undersigned has read the foregoing Release and Indemnity Agreement and in consideration of High View Farm allowing such minor entry onto its premises and/or allowing such minor to participate in equestrian activities, hereby agrees that all of the terms and conditions contained herein shall apply to such minor and shall be binding upon the undersigned and the minor.

The undersigned declares under penalty of perjury under the laws of the State of Rhode Island, that the foregoing is true and correct.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

**If under 18, the parent or guardian must read and sign the above, indicating his/her acceptance.**

**Date:** \_\_\_\_\_ **Signed:** \_\_\_\_\_

Print Participant Name: \_\_\_\_\_

**Date:** \_\_\_\_\_ **Signed:** \_\_\_\_\_

Print Parent/guardian (if minor): \_\_\_\_\_