

Girl Scouts of Central Texas Horse Program

Participant Information and Liability Release Form

The council's horse program facilitators and members of your group will work together to complete the activities and insure the safety of all. It is possible that you may be injured while participating in the program either because of your own conduct, the conduct of others in the group, or due to the nature of the activity.

WARNING: UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE AND REMEDIES CODE) AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES.

Texas Civil Practice and Remedies Code Title 4, Chapter 87

Please read carefully and sign below:

I acknowledge that there are significant risks and dangers involved with horses and horseback riding, and that horses are powerful and potentially dangerous animals; horseback riding entails known and unanticipated risks that could result in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. The risks include, among other things: contact with wild animals, hiking and exposure to the elements. A horse, regardless of its training and usual past behavior, may act unpredictably at times based upon instinct or fright which may cause you to be thrown from your horse or injured by the horse. Horses may do such things as bite, kick, buck, lie down or stumble. Saddles may slip or other tack or saddle problems may develop as a result of normal use and wear. A horse may collide with obstacles or encounter variations in terrain such as traveled roads, wild animals, birds, stumps, forest growth, debris, and rocks and other obstacles whether obvious or not and whether man made or natural. Each of those obstacles or variations in terrain could cause one to lose control of the horse and result in a fall. Riding a horse requires the participant to balance on the saddle and one may lose their balance resulting in a fall from the horse.

I understand that I will be a crucial aspect of my own safety as well as the safety of others. Inappropriate behavior that may bring harm to others or myself may result in removal from all other activities by the facilitators. Persons removed from any activity due to conduct will become the responsibility of the sponsoring agency/group/adult leader. Certain health/medical information must be made known to the facilitators conducting this program so they will be prepared to respond appropriately if the need arises. All information given on this form will be held in confidence.

Medical Information: (please print) Rider Weight Limit is 200 pounds

Name: _____ Weight: _____ Birth date: _____ Age: _____

If you have or have had any of the following symptoms or conditions, circle "yes", underline the specific condition, and provide pertinent details on the back of this form. If not, circle "no".

1. Yes No Unresolved muscle, joint, or nerve injury (including back, knee, or neck).
2. Yes No History of diabetes, thyroid imbalance or hypoglycemia or other related condition.
3. Yes No History of epilepsy, seizures, or fainting.
4. Yes No History of cardiac condition (such as palpitations, murmur, irregular rhythm)
5. Yes No History of irregular blood pressure.
6. Yes No History of respiratory condition (such as asthma, chronic bronchitis, COPD)
7. Yes No Injury or illness requiring hospitalization within the past six (6) months.
8. Yes No Episodes of depression, anxiety, hysteria, or nervousness.
9. Yes No Severe Allergies (including insects).
10. Yes No History of drug allergies (i.e. penicillin, tetanus antitoxin)
11. Yes No Currently taking any medications on a regular basis (please list on back all medications).
12. Yes No Currently under a medical professional's care or have other medical conditions not listed (please list on back).

Clothing appropriate for horseback riding must be worn by all participants which includes long pants or jeans and/or riding britches and riding boots or closed toed shoes with smooth soles and a heel of no less than 1 inch and no more than 2 inches. Extra wide hiking shoes/boots with lug soles are prohibited as they may get caught in stirrups. NO TENNIS SHOES-NO EXCEPTIONS! Helmets are provided and must be worn at all times in the barn area and while with the horses. Persons with long hair will be expected to gather it up along the nape of the neck so that a helmet can easily fit over. Jewelry, non-prescription eyewear or additional items must be removed before participation and Girl Scouts of Central Texas cannot be held responsible for these items.

I have read and understand this release of liability, and voluntarily sign it. I affirm that my weight is under the rider weight limit, my health is good and I am not under a physician's or other medical professional's care for any undisclosed condition that bears upon my fitness to participate in the activities. I hereby release the Girl Scouts of Central Texas, horse program facilitators, staff representatives, and volunteers from all liability for any injury to me from participating in the program activities. I hereby give permission for Girl Scouts of Central Texas staff to administer basic first aid or to seek appropriate medical assistance.

Signature of Participant

Signature of Parent/Guardian (if under 18)

Date