

2021 Release Form

One person per form, please make additional copies if you need them.

RELEASE WAIVER FOR HAPPY HORSE RIDING SCHOOL and LINDY COGSWELL'S clinics, workshops, horsemanship camps and other activities related to horses.

When riding and participating in horse activities there is a risk involved. Horses can be dangerous. Signing this releases Lindy Cogswell, Happy Horse Riding School and anyone connected with their activities from being held liable in case of an accident or injury.

Anyone bringing a horse agrees not to sue anyone connected with Happy Horse or Lindy Cogswell for any injury to the horse or property damage related to riding, transporting to or from, or housing their horse on Happy Horse property.

Students Name: _____ Address: _____
Date of birth _____

Parent's Name _____
(if student is a minor)
Phone# _____ E-mail _____

Work Phone# _____

Student's Signature _____ Date _____
(or parent if student is a minor)

PHOTO RELEASE

Do you give permission for photos of your child/student at the school to be used in advertising & on the Happy Horse web page?

☐ Yes

☐ No

MEDICAL RELEASE

I _____ give permission for my son, daughter or myself,

_____ to receive any necessary medical treatment while participating in
(student's name)
activities of Lindy Cogswell & Happy Horse Riding School.

Signature of Student or Guardian _____ Date _____

Emergency Contacts: _____ Phone _____

_____ Phone _____

Doctor's name _____ Phone _____

Medical insurance: _____

Additional information: Does your child have any medical conditions that may affect his/her ability to ride?
Allergies to foods or medications?