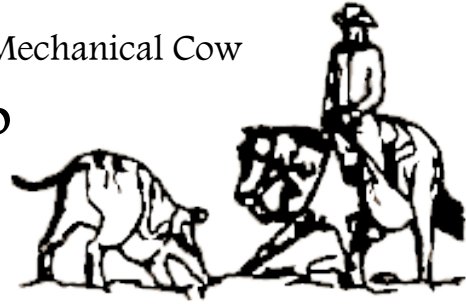


Whispering Meadows Equestrian Center

Cow Working Clinic with the Cowtrac Mechanical Cow

With **Scott DePaolo**

January 6, 2018
9:00 AM-4:00 PM



Questions?

Call WMEC
(541) 607-1902 or
e-mail wmec@att.net

Please send entry forms to:

WMEC
29015 Meadowview Rd
Junction City, OR 97448

Owner/Exhibitor Name _____ Age _____
Address _____
City _____ State _____ Zip _____
Phone _____ E-mail _____
Horse Name _____
Breed _____ Sex _____

Clinic Fees:

Clinic Fees: \$125.00 = _____

(Please make check out to **Whispering Meadows Equestrian Center**)

***Please be aware that any photographs taken during the clinic
may be posted on our website and may be used by
Whispering Meadows Equestrian Center in future advertising.***

Please bring you family and friends, but leave your **dogs** at home.

www.whisperingmeadowsec.com

WHISPERING MEADOWS EQUESTRIAN CENTER

RELEASE AND HOLD HARMLESS AGREEMENT

I acknowledge the risks involved in riding and working around horses or any equine, which include bodily injury from using, riding, training or being in close proximity to horses and other equines. In addition, it is my clear understanding that both animal and rider can be injured in normal daily activities as well as during lessons, ride around, showing and competition. I hereby agree to hold harmless and indemnify Whispering Meadows Equestrian Center, LLC, 29015 Meadowview Rd, Junction City, OR 97448 and further release them from any liability or responsibility for accident, damage, injury, illness, or death to the Undersigned or any horse or equine owned by the Undersigned or to any family member or spectator accompanying the Undersigned on the premises of Whispering Meadows Equestrian Center.

Printed name of person(s) riding at Whispering Meadows Equestrian Center

Copy of Equine Inherent Risk Law as posted at Whispering Meadows Equestrian Center and set forth by Or. Rev. Stat. s 30.691 (2001) has been identified, understood and agreed upon by the individual signing this document on date of signature. The undersigned acknowledges there are inherent risks associated with equine activities such as described below and hereby expressly assumes all risks associated with participating in such activities. The inherent risks include, but are not limited to, the propensity of equines to behave in ways such as running, bucking, biting, kicking, shying, stumbling, rearing, falling, or stepping on, that may result in an injury, harm or death to persons on or around them; the unpredictability of equines' reaction to such things as sounds, sudden movement and unfamiliar objects, person or other animals; certain hazards such as surface and subsurface conditions; collision with other animals; the limited availability of emergency medical care, and the potential of a participant to act in a negligent manner that may contribute to injury to the participant's ability. The undersigned and/or horse owner expressly release Whispering Meadow Equestrian Center, LLC, from any and all claims for personal injury or property damage, even if caused by negligence (if allowed by the laws of the state of Oregon) by Whispering Meadows Equestrian Center, LLC or its owners, representatives, agents, employees, or volunteers. You are advised that there are inherent risks, including the risks of serious injury or death, while engaging in equine activities. By engaging in equine activities, and in accordance with the terms of this Agreement, you hereby assume all risks of injury or death.

Date: _____ **Signature** _____

If person using the services is a minor then parent or legal guardian is required to sign this form. Minor is anyone under 18 years of age.

Address: _____

Telephone Numbers -

Home _____

Work _____

Cell Phone _____