Under the Equine Activity Liability Act we are required to provide the following warning...

WARNING

"Under the Equine Activity Liability Act each participant who engages in an equine activity expressly assumes the risks of engaging in and legal responsibility for injury, loss or damage to person or property resulting from the risk of equine activities" at Wohlers Stables, with Tiffany A.

Wohlers or Joshua A. Wohlers

WAIVER RELEASE AND INDEMNIFICATION AGREEMENT

To Wohlers Stables, Tiffany & Joshua Wohlers at 3285 Pitchford Road, Waverly, IL 62692

I have been given notice of the risks of engaging in equine activities including (i) the propensity of an equine to behave in dangerous way that may result in injury to participant (ii) in inability to predict an equine's reaction to sound, movements, objects, persons or animals and (iii) the hazards of surface or subsurface conditions.

In consideration of my being: permitted to ride in the Wohlers Stables indoor riding arena and outdoors on such other part of the farm which may be designated by you permitted to bring a horse to and from the arena by trailer permitted to stable my horse on the premises and/or taking riding lessons on the premises or elsewhere from any of you or members of my staff.

- I hereby release you as landowners and operators of said farm, your employees, and any
 person acting in the capacity of instructors or coaches (whether paid or not) from any
 damages for injury which I may receive to my person or property while present on your
 premises: this release is subject to limitations and exceptions provide in the Equine Activity
 Liability Act.
- 2) I agree to indemnify you and hold you harmless against the claims of any person for injuries which may be caused by me or by an animal or vehicle which I am owner or have on your premises under my care.

This release and indemnification agreement shall continue in effect for the calendar year in which I sign it and shall be binding on myself my heirs and my personal representatives.

Dated this	day of		20	
Printed Name		Signature of Client (Participant)		
Address	City	State	Zip Code	
Home Phone	Cell Phone	•	. Work Phone	
	undertaking for rider/client er/client, I give release and			
		Parent's/Lega	al Guardian's Signature	