



# Somerset Stables Release Form

Name of Student \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ Birth date \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Home Telephone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

Contact info \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

**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.**

I hereby give my permission \_\_\_\_\_ to participate in any and all activities of Somerset stables. I acknowledge that the instruction in equestrian skills has certain dangers inherent. I will not hold Somerset Stables, Kay Hicks, faculty, or staff responsible for any accidents or injuries sustained during lessons and/or camps while on the premises of Somerset Stables.

(Signature \_\_\_\_\_ Driver's License# \_\_\_\_\_

Subscribed and sworn before me on this day of \_\_\_\_\_

**Notary Official**

**Commission expires**

Notary Seal