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## RELEASE FROM LIABILITY/WAIVER OF CLAIMS

Any equine sport can be a hazardous activity, which may subject the participant to severe injury or even death. Havendell Farm may have hazardous areas or personal property that may pose a risk to safety, health or life. Havendell Farm and/or any agent thereof will not assume any liability for your presence or activities associated with the use of this facility and/or any horses (equine) at any time. This facility and the agents thereof provide general rules, instructions and techniques, which may not be advisable for everyone. Personal instruction in addition to careful consideration of the general instructions, rules and techniques are suggested before undertaking this sport or activity. In consideration of being granted permission to ride, visit, tour or participate in any activities at Havendell Farm, I hereby waive any and all claims, actions, or demands that may arise in favor of myself, or any of my heirs, successors, executors, or other including administrators, or assigns against Havendell Farm, Tara Wohlenhaus, or any agents thereof. This release shall be binding upon the heirs, successors, executors, administrators, or assigns of applicant or applicants.

WARNING: Under Indiana Law, an equine Professional is not liable for an injury to, or death of, a participant in equine activities due to the inherent risks involved in equine activities.

Printed name of participant \_\_\_\_\_

Current address of participant \_\_\_\_\_

Birth date of participant (month, date, year of birth) \_\_\_\_\_

I, the adult participant or the parent or legal guardian of a minor have read and understand the above statement on \_\_\_\_\_, 200\_\_\_\_. I have also read, understand and agree to abide by the Havendell Farm Rules. Any children present who are in my care will abide by the same rules.

Signature of participant if above 18 years of age

\_\_\_\_\_

Signature of Adult Parent/Legal Guardian (if participant is under 18 years of age)

\_\_\_\_\_

At times, we like to use photographs of our students, student's parents and other visitors on our website, printed materials, etc. Please sign the appropriate line below:

I do not wish to have my/my child's photos used as stated above \_\_\_\_\_

I will allow my/my child's photo to be used as stated above \_\_\_\_\_