



50 H. Foote Road, Charlton, MA 01507

WARNING: Under Massachusetts Law, an equine professional is not liable for any injury to, or death of, a participant in equine activities resulting from the inherent risks of equine activities, pursuant to Chapter 128, Section 2D of the Massachusetts General Laws.

Please read this document carefully and do not sign unless you fully understand it!

isitor's Name:		Date of Birth:	
Address:		City/Town:	Zip:
Home Phone:	Mobile Phone:	Email:	
rent / Guardian Name	(if visitor is under 18) :		
Address:		City/Town:	Zip:
Home Phone:	Mobile Phone:	Email:	
relative or friend or observing with injured person that and hold harmly students and the omission which limiting the for and/or agent from	and, should become injured at Bless ith an instructor, she/he has the per to the hospital for treatment. I/We ess, Blessings Farm, Inc, Board M e facility land owners from any cla a results in injury, loss to person, la egoing, the undersigned covenant form seeking relief for any damages	ander instructors or in connection there sings Farm, Inc., while riding, boarding the said parent or guarde, the undersigned, hereby voluntarily dembers, volunteers, horse owners, insaim, action or suit, arising from any on orse and/or equipment. In addition to said agrees to prohibit any relative, restrom Blessings Farm, Inc., Board Molity land owners of said premises on but the said premises of said premises on but the said premises of said premises on but the said premises on but the said premises of said premises of said premises of said premises on but the said premises of said said said said said said said said	ng, participating dian to send the release, indemnify structors, other occurrence, act or o, but in no way representative embers, volunteers,
Visitor's Signature:			Date:
Parent/Guardian's Sig	nature (if visitor is under 18 years o	f age)	Date: