

ACCESS ADVENTURE, INC.
3521 Grizzly Island Rd. Suisun City, CA 94585

VOLUNTEER LIABILITY RELEASE

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Age: _____ Date of Birth: _____ Phone (H) _____ (C) _____ (W) _____

Email address (please print): _____ Employer/School: _____

(Minor) Parent/Legal guardian: _____

Address: _____

City _____ State: _____ Zip: _____

5. Are you experienced working with horses? (Yes - No circle one) Please describe on reverse side of Release.

6. Do you have any physical or mental condition(s) that may affect your safety and ability to interact with horses? (Yes – No circle one). Please describe on reverse side of Release:

7. If you circled "YES", how can we help you with your special special needs? Please describe on reverse side of Release

8. MEDICAL INSURANCE I/WE AGREE THAT should medical treatment be required, I and/or my medical insurance shall pay for ALL such incurred expenses.

Volunteer Liability Release:

As a volunteer for ACCESS ADVENTURE I am aware of certain risks to me, including, but not limited to bodily injury, illness, loss or damage to my personal property and/or other safety related dangers. I further understand that activities involving open space, working ranches, natural lands and horse-related activities present inherent risks, including but not limited to variable weather, uneven ground, hill slopes, falling rocks, fences, power systems, wells and water systems, man-made structures, natural or man-made water features, potentially hazardous livestock, wildlife and plants, getting lost, and absence of medical attention.

I certify that I am voluntarily participating as a volunteer and I voluntarily assume all risks, consequences, and potential liability for this participation. I hereby **WAIVE, DISCHARGE AND RELEASE FROM LIABILITY** ACCESS ADVENTURE, the Solano Land Trust, Rush Ranch Education Council and their respective employees, Board of Directors, members, volunteers, instructors, and their representatives and assigns, from **any and all liability**, claims, causes of action, debts, and demands that may arise from my participation. I am voluntarily participating as a volunteer and I voluntarily assume all risks, consequences and potential liability for this participation, including any and all liability, claims, causes of action, debts and demands that may arise from my participation. In case of my injury, accident, illness or inability to complete this activity, I understand that I will bear the full cost of any additional transportation or evacuation procedures performed by ACCESS ADVENTURE. I understand and intend that this assumption of risk and release is binding on my heirs, executors, administrators and assigns.

I hereby consent to and authorize the use, in print or electronic format, any and all photographs of me, or my child: ___ Yes ___ No

Signature: _____ Date: _____

Print Name: _____

Parent/Guardian Signature for Minor: _____ Date: _____

Print Name: _____