

Equine Fellowship  
Liability Release

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Age as of 1/01/11 \_\_\_\_\_ Member Yes No

Shirt Size – (Youth or Adult) \_\_\_\_T YS YM YL S M L XL Other \_\_\_\_\_

Age Divisions (Circle One) Age divisions may be adjusted depending upon entries.

Leadline 12 & Under 13-17 18-29 30 & Over Novice

**Liability Release**

I, \_\_\_\_\_, do hereby release the Equine Fellowship, its officers, members and volunteers, and the Missaukee Agricultural Society, its officers, members and volunteers from any liability in regards to my or my child's \_\_\_\_\_, participation in their event(s). I acknowledge that activities with horses have inherent risk and I take responsibility for any injuries or damage that may occur to myself, property, or other people due to these risks. I also acknowledge that I am aware of the Michigan Equine Liability Act and accept it provisions. This release is valid for all Equine Fellowship Events during the current year.

Ride At Your Own Risk

\_\_\_\_\_  
Signature Date

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Office Use Only

Membership Paid \_\_\_\_\_ Verified by \_\_\_\_\_