

## Liability Release Form

*Southern Arizona Veterinary Equine Rescue*

*11650 E. Speedway Blvd*

*Tucson AZ, 85748*



Date: \_\_\_\_\_ (mm/dd/yyyy)

I \_\_\_\_\_, completely understand and realize my participating in equine activities could include actions or tasks which might be dangerous or hazardous to me.

By signing below, I agree to the that participation can cause harm or injury to me. I release Southern Arizona Veterinary Equine Rescue and Pegasus Veterinary Center from all liability, cost, and damages which could arise from my participation in any and all equine activities. I agree to accept financial responsibility for the cost related to any emergency treatment and give my confirmation of the same by signing this document.

Signature of Participant : \_\_\_\_\_ Date: \_\_\_\_\_

Name of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent of Guardian: \_\_\_\_\_ Date: \_\_\_\_\_