

## Accepting 2009 Public Open Arena Rules Agreement

ELLIS HOUSE & EQUESTRIAN T E R 13986 McKanna Rd, Minooka, IL 60447; info@ellishec.com; Fax 815-475-4105



I, the undersigned, desire to be a participant at the Ellis Equestrian Center of the Kendall County Forest Preserve District, subject to the rules of the Forest Preserve presently in force and as modified from time to time and under the direction and control of authorized Forest Preserve personnel. I have read the instructions related to the Equestrian program, prepared by the Forest Preserve, and agree to abide by all its terms and conditions as set forth therein and as modified from time to time hereafter, including the following:

## Public 'Open Arena' Rules

- · Use the arena at your own risk
- Horseback-riding headgear approved by the Safety Equipment Institute and American Society for Testing and Materials (SEI-ASTM) is required.
- · Only Ellis Equestrian Center Personnel are permitted to instruct or coach
- · The use of schooling equipment including but not limited to jump standards and poles is not allowed
- · Arena use is prohibited during Ellis Equestrian Center programs and Maintenance activities
- · Unsafe, or inappropriate activities will result in the loss of arena use privileges. \*
- · Be aware that other arena users Ellis Equestrian Center horses may get loose from their handlers and suddenly rear, leap, shy, run, buck, kick, or bite, causing other horses to act similarly. \*

\*refers to exceptions in Illinois Equine Liability Act requirements to declare and uphold these statements

In consideration of the Forest Preserve accepting the undersigned for participation in the Equestrian program and the educational and other benefits to be received by the undersigned, and with the understanding that a horse may be startled by sudden movement, noise or other factors, and may shy suddenly, rear, stop short, bite, buck, kick or run with its rider, especially when the ride is conducted through an outdoor or natural setting, as lessons and trail rides will be, I hereby assume all risks of any nature whatsoever related to the program including, but not limited to, those risks set out above, and on my own behalf, on behalf of my child or ward, and on behalf of my child's ward's heirs, executors and administrators.

I understand that at no time am I an employee or agent of the Forest Preserve, its Commissioners, Employees, Agents, and Volunteers.

I have read the above and agree to its terms. My birthday is

If the Participant is under 18 years of age, the student's parent(s) or guardian(s) must sign this Agreement on behalf of the student, agreeing to the terms and conditions of this Agreement.

Participant Signature

Type or Print Participant's Name

Date:

Indicate signature relationship Participant

Father

Mother

Guardian

Sign and print name above