

Catherine and Mark Fallon**Kastlerock Ranch**

5050 Edgewood lane • Paradise, CA 95969 • (530) 570-4185

REGISTRATION FORM

| RESPONSIBLE PERSON'S INFORMATION | | | | |
|----------------------------------|---------------|-----------------|-------------|----------|
| Last, | First, | Middle | | |
| Mailing Address | | City | State | Zip Code |
| Daytime Phone | Evening Phone | Emergency Phone | Cell Phone: | |
| E-mail or Other Information | | | | |

FOR OFFICE USE ONLY
Receipt # _____
Amount Paid \$ _____
Date ____/____/____

| PARTICIPANT'S INFORMATION | | | | |
|---------------------------|-------|---|------|-------|
| Participant's Name | M | F | Age | Grade |
| Activity Name | Date: | | Time | Fee |

Additional Information: Level of activity based on knowledge and skill

AGREEMENT, WAIVER, RELEASE**ALL PARTICIPANTS OR PARENTS/GUARDIANS MUST READ BEFORE SIGNING!**

In consideration for being permitted by Mark and Cathy Fallon to participate in an athletic activity involving riding lessons, horses, training, horsemanship and the various horse related activities including but not limited to riding horses within a ranch environment with livestock. I hereby waive, release and discharge any and all claims for damage which I may have or which may hereafter accrue as a result of my participation in said activity. This release is intended to discharge in advance Mark and Cathy Fallon, their affiliates, their employees and agents from and against any and all liability arising out of or connected in any way with my participation in said activity.

I understand that the above sport may be of a hazardous nature and/or include physical and/or strenuous exercise or activity; and that participants in the above sport or activity occasionally sustain mortal or personal injuries and/or property damages as a consequence thereof. Knowing the risks involved, nevertheless, I have voluntarily applied to participate in said activity and I hereby agree to assume any and all risks of injury or death and to release and hold harmless Mark and Cathy Fallon, their affiliates, their employees and agents. It is further understood and agreed that this waiver, release, and assumption of risks is to be binding on my heirs and assigns.

I further agree to indemnify and to hold Mark and Cathy Fallon, their affiliates, their employees and agents free and harmless from any loss, liability, damage, cost or expense which they may incur as a result of any injury and/or property damage that I may sustain while participating in said activity.

I grant to Cathy and Mark Fallon, its representatives and employees the right to take photographs of me, my family or my children and my property in connection with any Horse Camp. I authorize Cathy and Mark Fallon, its assigns and transferee's to copyright, use and publish the same in print and/or electronically.

I agree that Cathy and Mark Fallon may use such photographs of me, my family or my children with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

PARENTAL CONSENT: (to be completed and signed by parent/guardian if applicant is under 18 years of age.) I hereby consent that the above children may participate in the activity listed, and I hereby execute the above Agreement, Waiver, and Release on his/her behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold the persons harmless from any loss, liability, damage, cost or expense which they may incur as a result of the death or injury or property damage that said minor may sustain while participating in said activity.

I HAVE CAREFULLY READ THE ABOVE AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND MARK AND CATHY FALLON, THEIR AFFILIATES, THEIR EMPLOYEES AND AGENTS AND SIGN IT OF MY OWN FREE WILL.

SIGNATURE _____ DATE _____