

SunnyBrook Meadows  
426 State Home Road  
Montgomery, PA 17752  
570-547-1565

www.sunnybrookmeadows.com

## **REGISTRATION AND RELEASE FORM**

### **Registration**

Rider's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parent's Name (Guardian) \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_

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

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Emergency # \_\_\_\_\_ Email Address \_\_\_\_\_

Registration Fee \$25 (fee refundable if we cannot accommodate you)

Please return this completed form **with the registration fee to:** Edna Riddell  
426 State Home Road  
Montgomery, PA. 17752

### **Liability Release**

\_\_\_\_\_ (Client's Name) would like to participate in the SunnyBrook Meadows Riding Program. I acknowledge the risks and potential for risks of horseback riding. However, I feel that the possible benefits to myself /my son/my daughter/my ward are greater than the risk assumed. I hereby, intending to be legally bound, for myself, my heirs and assigns, executors or administrators, waive and release forever all claims for damages against SunnyBrook Meadow Riding program, its Board of Directors, Instructors, Therapists, Aides, Volunteers and or Employees for any and all injuries and/or losses I/my son/my daughter/my ward may sustain while participating in SunnyBrook Meadows Riding program.

Date: \_\_\_\_\_ Signature \_\_\_\_\_  
Client, Parent or Guardian

### **Photo Release:**

I hereby consent to and authorize the use and reproduction by SunnyBrook Meadows of any and all photographs and any other audiovisual materials taken of me/my son/my daughter/my ward for promotional printed material, educational activities or for any other use for the benefit of the program.

Date \_\_\_\_\_ Signature \_\_\_\_\_  
Client, Parent or Guardian