REBA FARM/SADDLE SOAR EQUITAINMENT

1099 Reba Farm Lane & 1818 Owl Town Road

Bedford, VA 540-583-1906 (call or text)

GENERAL RELEASE FOR PARTICIPATION IN HORSEBACK RIDING

Release executed on	by _	
(d	ate)	(parent or custodian)
Of		, referred to as
(address of parent	or custodian)	
"Releasor".		
In consideration of be	ing permitted to p	articipate in horseback riding at Reba
Farm Inn/Saddle Soar (F	RFI/SS), Bedford,	Virginia, Releasor, for
	and personal	representatives, heirs,
(camper's name)		
And next of kin, releases	s and promises not	t to sue RFI/SS, it's officers, employees,
all referred to as released	es, from all liabilit	y to the Releasor, his/her personal
representatives, assigns,	heirs, and next of	kin for all loss or damage, and any claim
or damage, on account o	f injury to the pers	son or property or resulting in death of
the Releasor, whether ca	used by the neglig	gence of releasees or otherwise while the
Releasor is participating	in horseback ridir	ng at RFI/SS.
Releasor, expressly ag	grees that this relea	ase, waiver, and indemnity agreement is
intended to be as broad a	and inclusive as pe	ermitted by the laws of Virginia, and that
if any portion of the agre	ement is held inv	alid, it is agreed that the balance will,
notwithstanding, continu	ie in effect. Relea	sor further expressly agrees that this
release applies regardles	s of the physical le	ocation of the horseback riding, whether
it be on the property of F	RFI/SS or in the ar	rea of RFI/SS and/or at off site locations.
D 1 1 1 C1	C 1	
_		eration of being permitted to participate
in horseback riding at Rl	71/33, does for	(aamnar'a nama)
		(camper's name)

His/her heirs, executors, administrators, and assigns, releases RFI/SS, it's officers and members, owners, and lessees of the premises, their

Officers and employees, their heirs, administrators, and executors from any claim, demand, action or right of action, either in law or in equity arising from any bodily injury or personal injuries known or unknown, death and/or property damage resulting or to result from any accident which may occur as a result of connection with horseback riding at RFI/SS, whether by negligence or not.

Releasor further states that he/she has carefully read this release and knows the contents of the release and sign this release at his/her own free act.

Releasor further releases RFI/SS, it's officers and members, owners and lessees of the premises, their officers and employees from any claim on account of first aid, treatment or service rendered him/her during participation in horseback riding at RFI/SS.

This release contains the entire agreement between the parties to this agreement and the terms of this release are contractual and not a mere recital.

Date	Releasor (Parent or custodian signature)
I	, hereby acknowledge that I have
(parent or guardian)	
read Virginia Code 3.1-796.	130 and fully understand.
NAME PRINTED (Parent	t/Guardian)
Signature (Parent/Guardi	ian) (Date)