



**RANCH VERSATILITY CLINIC**

Saturday, May 6, 2017

9:30 AM Start Time

Stonybrook Saddle Club, Inc.  
3656 Clements Road  
Pittsburgh, PA 15239

**Clinic Registration Form**

The Ranch Versatility Clinic will be held at Stonybrook Saddle Club on May 6, 2017. The clinic will be conducted by Evon Montgomery. To reserve your spot in the clinic, fill out this form and the attached waiver and photo release. Send them to the address listed at the bottom of the page along with your non-refundable clinic fee **no later than May 1, 2017**.

Clinic will be held at  
**Stonybrook Saddle Club**  
**3656 Clements Road**  
**Pittsburgh, PA 15239**  
**9:30am Start Time**

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact Name & Number:

\_\_\_\_\_

Clinic Fee: \$55 non-members; \$45 Stonybrook Members

Please make check payable to **Stonybrook Saddle Club**. Clinic fees are non-refundable. Clinic is capped at 12 riders; reservations are first come, first served.

Mail checks & forms to:  
**Stonybrook Saddle Club**  
**c/o DeAnn Sloan**  
**103 Valley Drive**  
**Pittsburgh, PA 15215**

Any questions, please contact DeAnn at 570-490-5273.  
See you there!



## 2017 GENERAL AGREEMENT & RELEASE OF LIABILITY

I, \_\_\_\_\_ (must be signed by a parent/guardian if person named above is under the age of 18), hereby acknowledge that I have requested permission to participate in equestrian or other activities on the premises of Stonybrook Saddle Club, Inc. I have read and agree to abide by the Stonybrook Saddle Club, Inc. facility use rules.

I am aware that combined training and eventing, jumping, trail riding, conditioning, polo, gaming, and all other forms of equestrian activities, including the teaching, training, or coaching thereof, can be hazardous. I am voluntarily participating in equestrian or other activities with the knowledge of the danger involved and hereby agree to accept any and all risk of injury or death.

In consideration of being permitted to use the facilities of the Stonybrook Saddle Club, Inc., I hereby agree that I, my heirs, my personal representatives, guardians, legal representatives, and/or assignees will not make claim against, sue, attack the property of, or prosecute Stonybrook Saddle Club, Inc., its landlord, directors, officers, members, volunteers, employees, or assignees for any claim I now have or may hereafter for death, injury, or property damage resulting from the use of the facilities at Stonybrook Saddle Club, Inc., whether caused by my acts of omission or negligence or anyone else's. In addition, it is understood that any and all insurance that I have shall be primary.

To the fullest extent permitted by law, I shall defend, indemnify, and hold harmless the Stonybrook Saddle Club, Inc., its landlord, directors, officers, agents, volunteers, and employees for and against any and all claims, damages, losses, expenses, and liabilities of every kind, including but not limited to attorney's fees, in any way arising out of or in connection with my activities under this agreement. This indemnity shall apply regardless of any active and/or passive negligent act or omission of the Stonybrook Saddle Club, Inc., its landlord, directors, officers, agents, volunteers, and employees.

I have carefully read this agreement and release and fully understand its contents. I am aware that this is a Release of Liability, a waiver of legal rights and contracts between the Stonybrook Saddle Club, Inc. and me.

I am signing this agreement and release of liability at my own free will. I further acknowledge that there are no warranties, either expressed or implied, concerning the facilities, events, or activities at Stonybrook Saddle Club, Inc.

Family members may all sign the same release. Print then sign your name. **ADULTS MUST SIGN FOR MINORS.**

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



## 2017 PHOTO RELEASE

I grant to the Stonybrook Saddle Club, Inc., its representatives, volunteers, and employees the right to take photographs of me and/or my horse/property in connection with Stonybrook Saddle Club, Inc. sponsored activities. I authorize Stonybrook Saddle Club, Inc., its assigns and transferees to copyright, use, and publish the same in print and/or electronically.

I agree that Stonybrook Saddle Club, Inc. may use such photographs of me and/or my horse/property with or without my name and for any lawful purpose, including for such purposes as publicity, illustration, advertising, and Web content.

I have read and understand the above. Family members may all sign the same release. Print then sign your name. **ADULTS MUST SIGN FOR MINORS.**

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Printed Name

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Signature

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Parent/Guardian Signature

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Date