

**SILVER LAKES ASSOCIATION EQUESTRIAN CENTER
MINOR LIABILITY WAIVER AND PARENTAL CONSENT FORM
(For Children Age of 14 and older)**

I, _____, am a member/resident of the Silver Lakes Association. I understand and acknowledge that the **Silver Lakes Association Equestrian Center** is **private property** designated for **owners and their guests only**. Unauthorized access is considered **trespassing**.

I am the **parent or legal guardian** of the minor named below, who's age is 14 and older. I am providing this consent and liability waiver so that they may enter and use the facilities at the Silver Lakes Association Equestrian Center. **I am aware and understand that at NO time or circumstance will a minor 13 year or younger be permitted on premises unsupervised.**

Minor's Full Name: _____

Date of Birth: _____ **Age:** _____

Address: _____

Phone Number: _____

A. GENERAL RULES AND ACKNOWLEDGMENT

1. I understand that children under the age of fourteen (14) must be **accompanied by a parent, guardian, or a designated responsible adult over 18 years of age** at all times while on Equestrian Center property.
2. I acknowledge that **riding helmets are recommended** for all riders, and that horseback riding and other equestrian activities are inherently dangerous and may result in severe injury or death.
3. I acknowledge that **children under the age of 18 years of age are not permitted at the Equestrian Center between 10:00 PM and 6:00 AM** unless accompanied by a responsible adult over 18 years of age.
4. I understand that **parental consent forms expire annually** and must be renewed for continued access.
5. I understand that all activities on the property must comply with **Silver Lakes Association rules and regulations**.

B. LIABILITY WAIVER AND RELEASE

In consideration of the minor's access to and use of the Equestrian Center, I hereby agree to the following on behalf of myself and the minor:

- I release, waive, discharge, and covenant not to sue the **Silver Lakes Association**, its **board of directors, employees, agents, volunteers, and affiliates** from any and all

liability, claims, demands, actions, or causes of action for any injury, illness, death, or damage to personal property arising out of or related to the minor's participation in equestrian activities or presence on the premises.

- I assume full responsibility for any risks, known or unknown, arising from or associated with the minor's presence or activities at the Equestrian Center.
- I agree to indemnify and hold harmless the Silver Lakes Association from any loss, liability, damage, or cost they may incur due to the minor's participation in such activities.

Signature of Parent/Guardian: _____

Printed Name: _____

Date: _____

Emergency Contact Name: _____

Relationship to Minor: _____

Phone Number: _____

FOR OFFICE USE ONLY

☐ Consent Approved by General Manager/Designee

Signature: _____

Date: _____