



Waiver And Release Of Liability

Activity Consent

I acknowledge the risks and potential for risks of horseback riding and related equine activities, including grievous bodily harm. However, I feel that the possible benefits to myself/my child/my ward are greater than the risk assumed. The participant is authorized to participate in any and all officially administered, sponsored or sanctioned activities at Victory Junction as we choose. Further, I hereby release, discharge and otherwise indemnify Victory Junction, its affiliated organizations and sponsors, its officers, directors, employees, volunteers and agents (the "Camp Parties") against any claim by or on behalf of Participant as a result of my participation in any program or activity sponsored, coordinated, or supervised by Victory Junction. I also agree to release, discharge and agree to hold harmless and indemnify the Camp Parties with respect to any medical expenses resulting from personal injuries sustained by Participant while engaged in such activities or otherwise at the Camp facilities. I also understand that this release includes traveling to or from the programs or activities.

Assumption of Liability for Damage to Camp Property

I understand that I will be responsible for paying for any damage or destruction of camp property arising as a direct or indirect result of the actions of Participant.

Photo & Publicity Release

_____ I hereby consent and authorize _____ I do not consent to, nor do I authorize

- 1), Victory Junction/ Vic's Riders to use my (my child's) photograph or image in its print, online and video publications;
- 2) Release Victory Junction/Vic's Riders, its employees and any outside third parties from all liabilities or claims that I might assert in connection with the above-described activities and
- 3) waive any right to inspect, approve or receive compensation for any materials or communications, including photographs, videotapes, DVDs, website images or written materials, incorporating photos/images of me(my child).

Date: _____ Signature (Client, Parent, or Legal Guardian) _____

Date: _____

Name: _____

Signature _____

If under the age of 18 :

(Guardian must accompany minor to first interview/class/lesson)

Parent of Guardian Name: _____

Parent of Guardian Signature: _____