## Upper Columbia Academy

## Riding Release

As the parent/guardian of	, (Hereafter called participant), I
hereby give my signed permission for him/her	to participate in horse-related activities on and off
campus. Any exceptions are stated here.	
discharge Upper Columbia Academy, the Uppe faculty, staff, employees, contract personnel, a joint ventures from all claims, demands, action to participants or damages to their property w	s unique risks and hazards, we hereby release and forever or Columbia Conference of the Seventh-day Adventists, it's agents, and volunteers, successors or assigns, lessors, and as, or causes of actions on account of any injury or death hich may occur during any horse ride or activity involving sponsible for any and all medical expenses that may
All participants are required to wear ASTM/SEI any horse boarded at Upper Columbia Academ	certified Riding helmets when riding any horse, including by.
	r the participant's actions and the result of said actions to a person(s), animal(s), or property not our own.
Parent/Guardian (Printed)	
Parent/Guardian	
Signature	Date
Witness	
, -	tion of the horse stables, operations, and designated with good grace even if I don't agree. Failure to follow the lemy's Horse Program.
Participant	Date