
Presents
**Ryan Bell**
4035 Flint Hill Road
Powder Springs, GA 30127

Saturday, January 19th
Sunday, January 20th

**Registration end date – January 14th, 2019**

Rider Participants: Rider Participants meals included in Cost.

2 Days: $\_\_\_\_\_\_ $270 Private Lessons (Sat & Sun)
1 Day: $\_\_\_\_\_\_ $135 1 Private Lesson

Auditors: Pre-paid auditor registration includes meals.

2 Days: $\_\_\_\_\_\_ $30 (Sat & Sun)
1 Day: $\_\_\_\_\_\_ $20

Stabling: $\_\_\_\_\_\_ $25 per day (includes bedding and trailer parking)
Additional Meals: $\_\_\_\_\_\_ $10 each

 $\_\_\_\_\_\_ Total Payable to: Maven Sport Horses

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

One Registration Per Person. Include the following:

**1) Registration
2) Copy of a current coggins and current vaccinations
3) SIGNED release waiver attached
4) Check(s) send to: Maven Sport Horses,LLC, 4035 Flint Hill Road, Powder Springs, GA 30127
5) Preference (am or pm) for lessons**

Questions?
Contact Hannah Rickles at mavensporthorses@gmail.com or 678-882-5439
NO REFUNDS without veterinary notice.

LIABILITY RELEASE:

-- PLEASE READ CAREFULLY BEFORE SIGNING –

WARNING: UNDER GEORGIA LAW, AN EQUINE ACTIVITY SPONSOR OR EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES, PURSUANT TO CHAPTER 12 OF TITLE 4 OF THE OFFICIAL CODE OF GEORGIA ANNOTATED.

I, the undersigned, have read and understand the Georgia Equine Liability Law. I hereby release, waive responsibility, discharge and covenant not to sue Maven Sport Horses, LLC., its representatives, agents, directors, sponsors, employees, trainers or volunteers, jointly or individually, for any loss or claim as a result of personal injury or property damage which might arise from my participation in any program or activity directly or indirectly involving Maven Sport Horses, LLC, whether or not upon premises then occupied Maven Sport Horses, LLC.

Furthermore, I the undersigned, hereby release and hold harmless Corrie Tabb and Hannah Rickles, their heirs and assigns, owners, landowners, and other horse owners jointly or individually, harmless from any and all costs, claims, and liabilities of any kind arriving out of my use of the facility, any animal activities, any equine, dog, cat or animal on the property, living at, visiting, or boarding at the facility. As a consideration for my visiting the facility, I assume any risk of damage to property, animal, or injury to myself or anyone visiting the facility with me. I understand that handling and/or riding horses is an extremely dangerous activity and that there are numerous obvious and non-obvious inherent risks always present in such activity despite all safety precautions. No horse is a completely safe horse, and if frightened or provoked may divert from its training and act according to its natural survival instincts which may include, but are not limited to, biting, striking, kicking, bolting, and running from perceived danger, which can cause injury or death to me or others. I understand there are certain risks inherent with handling animals and I accept those risks.

Furthermore, I understand that if it is determined I am in any way detrimental to and/or uncooperative with the policies and procedures of Maven Sport Horses, LLC, then in place for the safety and protection of the animals and other persons present, I may be denied further permission to participate in the activities and programs of Maven Sport Horses, LLC wherever they may occur. Notwithstanding, the foregoing Release of Liability and Waiver of Responsibility shall remain in full force and effect.

Should Maven Sport Horses, LLC change its name or relocate at any time, the foregoing agreement shall remain in full force and effect.

I/We, the undersigned, have read and understand the foregoing agreement, warnings, and Release of Liability and Waiver of Responsibility. I/We further understand and agree that I/We are assuming all risks attendant to the handling and/or riding of horses. I/We attest that all facts conveyed to Maven Sport Horses, LLC either verbally or in writing, relating to physical condition, age and experience are correct and are being relied upon as such.

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

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_

Name(s) and age(s) of child(ren) who will be accompanying you: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IF THIS IS A RELEASE AND WAIVER FOR A MINOR (UNDER 18 YEARS OLD), A PARENT OR GUARDIAN MUST SIGN IN AGREEMENT.

Signature of Parent/Guardian for children under 18: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
City, ST, ZIP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Emergency Contact Name and Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_