

Ride With Pride at Cedar Creek Stables

BARN RULES

1. Remember: Common Sense, Consideration; and Respect for others applies at all times!
2. Please remember to drive slowly down the driveway 5MPH PLEASE! There are many dogs, cats, horses, and kids roaming the property.
3. NO SMOKING AROUND OR IN THE BARN – ASK YOUR INSTRUCTOR FOR THE DESIGNATED AREA.
4. Remember that Cedar Creek Stables is not owned by Ride with Pride (RWP). Please stay in RWP's designated areas and be respectful of Cedar Creek property and employees.
5. Use only RWP equipment in RWP Tack Room
6. Only get a horse out of their stall if instructed to by a RWP Instructor and with a volunteer present.
7. Only go into pastures if you have been instructed to by a RWP Instructor.
8. Please refrain from bringing any pets to the barn if possible. Service dogs are welcome.
9. The rider's Parent/Guardian/Counselor/Mentor must stay on premise while the rider is participating in their lesson/event.
10. Pick up your personal items and any equipment that you've used. Don't leave items lying in the aisleways or work areas; put it away where it belongs.
11. Riders and guests are only allowed at the Stables when a RWP Instructor is on the premises; Unless special arrangements are made with the Program Director or Barn Manager.
12. No Running, yelling, or throwing things while in the barn.
13. Children must be supervised at all times. Parents/guardians are responsible for making sure that children do not roam around the property unattended. All children and parents must remain on benches near riding arena, in the classroom, at the picnic table, in their cars, or on the trails (only if lesson goes on a trail ride) at all times.
14. Parents and visitors should not be in the barn aisleway during grooming and tacking. Please ask your instructor where you can stand to watch.
15. If anyone is physically abusive (punching, slapping, pinching, biting, or spitting) towards the animals (horses, dogs, cats, etc.) or humans while at RWP/Cedar Creek Stables, they will be asked to leave the program until an incident review meeting is set up with the Program Director and a representative of the Ride With Pride Board.
16. Students are required to wear an approved hard helmet while riding their horses. RWP provides helmets for students in the classroom at the barn.
17. While riding and working with horses – participants must wear tennis shoes or boots with heels- unless arrangements have been made with the **instructor**. NO open-toed shoes are allowed on or around the horses. Riders must wear suitable clothing to ride in; long pants are required/no shorts while riding.
18. Only feed treats to RWP Horses, and only in their feed buckets when told by the instructor.
19. Report all accidents, injuries, or hazardous conditions to RWP staff members as soon as possible.
20. Individuals with known allergic reactions to bees:
 - Parent/guardian/caretaker must always remain in line-sight of the rider.
 - Parent/guardian is medically and legally responsible for that client
 - The parent/guardian must maintain at all times a fully functioning EpiPen or equivalent and have the knowledge and instruction from theirs or the client's physician in the use of the medical device.

Parent/guardian will not hold the instructors, employees, volunteers, or program officers responsible for any incidents resulting in injury or death of the client.

Ride with Pride Program Rules

1. **ALL FORMS MUST BE COMPLETED BEFORE RIDER CAN PARTICIPATE IN PROGRAM**
2. The rider's Parent/Guardian/Counselor/Mentor must stay on premise while the rider is participating in their lesson/event.
3. Student riding weight limit- **230lbs** - *this is to ensure volunteer, student, and horse safety. Any participant exceeding this limit can still participate in horsemanship ground lessons.*
4. Two (2) UNEXCUSED ABSENCES (no show, no phone call) will remove you from the session with no refund.
5. *** INCLEMENT WEATHER *** If Ride With Pride has to cancel lessons due to inclement weather, the lesson will be made up during a designated makeup week scheduled by the instructor and Director. If inclement weather is expected, the Director or instructor will contact rider to cancel lessons.
6. Individuals with known allergic reactions to bees:
 - a. Parent/guardian/caretaker must always remain in line-sight of the rider.
 - b. Parent/guardian is medically and legally responsible for that client.
 - c. The parent/guardian must maintain at all times a fully functioning EpiPen or equivalent and have the knowledge and instruction from their or the client's physician in the use of the medical device.
 - d. Parent/guardian will not hold the instructors, employees, volunteers, or program officers responsible for any incidents resulting in injury or death of the client.
7. REMEMBER – Ride with Pride teaches HORSEMANSHIP – which means that part of the lesson will be spent grooming and connecting with the horse and part of the lesson will be spent riding.
8. Use *only* Ride With Pride equipment in Ride With Pride Tack Room
9. While riding and working with horses – participants must wear tennis shoes or boots with heels- unless arrangements have been made with the instructor. NO open-toed shoes are allowed on or around the horses. Riders must wear suitable clothing to ride in; long pants are required/no shorts while riding unless previous arrangements have been made; bareback riding may be necessary in some wardrobe situations.
10. While riding and working with horses – participants are required to wear an ASTM/SEI approved helmet. Ride With Pride provides helmets for students, located in the classroom at the barn.
11. Only get a horse out of their stall if instructed to by a RWP Instructor and with a volunteer present.
12. Only go into pastures if you have been instructed to by a RWP Instructor.
13. Only feed treats to RWP Horses, and only in their feed buckets when told by the instructor.
14. Pick up your personal items and any equipment that you've used. Do not leave items lying in the aiseways or work areas; put it away where it belongs.
15. No Running, yelling, or throwing things while in the barn.
16. Children must be supervised at all times. Parents/guardians are responsible for making sure that children do not roam around the property unattended. All children and parents must remain on benches near riding arena; in the classroom; at the picnic table; in their cars; or on the trails (only if lesson goes on a trail ride) at all times. Parents and visitors should not be in the barn aisleway during grooming and tacking. **Please ask your instructor where you can stand to watch**
17. Riders and guests are only allowed at the Stables when a Ride With Pride Instructor is on the premises- Unless special arrangements are made with the program director or barn manager.
18. If anyone is physically abusive (punching, slapping, pinching, biting, or spitting) towards the animals (horses, dogs, cats, etc.) or humans while at Ride With Pride/Cedar Creek Stables, they will be asked to leave the program until an incident review meeting is set up with the Program Director and a representative of the Ride With Pride Board
19. Please remember to drive slowly down the driveway 5MPH Please! There are many dogs, cats, horses and kids roaming the property.
20. Remember that Cedar Creek Stables is not owned by Ride With Pride. Please stay in Ride With Pride's designated areas and be respectful of Cedar Creek property and employees.
21. Report all accidents, injuries, or hazardous conditions to RWP staff members as soon as possible.

Please return just this paper to the Program Director.

Acknowledgement of Rules:



Participant/Rider Name:

hereby acknowledges receipt and understanding of the current Ride with Pride Barn and Program Rules and Restrictions.

PARTICIPANT/RIDER agrees he/she and his/her guests and invitees will be bound and abide by these Rules and accepts responsibility for the conduct of his/her guests and invitees according to these Rules. Ride With Pride may revise these Rules from time to time and PARTICIPANT/RIDER agrees any revision shall have the same force and effect as current Rules. Failure, as determined in Ride with Pride's sole discretion, of PARTICIPANT/RIDER or PARTICIPANT/RIDER's guests and invitees to abide by Ride with Pride's Rules may result in Ride with Pride declaring RIDER in default hereunder and result in termination of this agreement.

I have read, understood, and agree to abide by the Cedar Creek Barn Rules and Ride with Pride Program Rules. This agreement is valid for one year from the date of signature.

Print Name: _____ Date: _____
Participant

Signature: _____
Participant

Print Name: _____ Date: _____
Parent/Guardian

Signature: _____
Parent/Guardian

This copy of the acknowledgement of rules will be kept on file by Ride with Pride and can be provided to the rider by request.

CEDAR CREEK STABLES RELEASE AND WAIVER OF LIABILITY

Melyni J. Worth T/A Cedar Creek Stables

I am aware that horseback riding and other equine activities are athletic events which pose potentially serious risks of injuries or death to their participants. I understand that my horse(s) or I may be injured or die as a result of my negligence, the negligence of others, or through no fault of myself or anyone else, because of the nature of the activity in which I am going to be engaged. I also understand that horses, even the most well trained, are often unpredictable and are often difficult to control.

With this waiver I accept notice of the provisions of the Equine Activity Liability Act 3.1-796.130 through 3.0-796.133 of the Code of Virginia, 1950, which state in part: "(i) the propensity of equines to behave in ways that may result in injury, harm or death to persons on or around them; (ii) the unpredictability of an equine's reaction to such things as sounds, sudden movement, and unfamiliar objects, persons or other animals; (iii) certain hazards such as surface and subsurface conditions; (iv) collisions with other animals or objects; and (v) the potential of a participant acting in a negligent manner that may contribute to injury to the participant or others, such as failing to maintain control over the equine or not acting within the participant's ability. Furthermore, with this waiver, I expressly assume the risk of injury or death due to negligence by Melyni J. Worth, trading as Cedar Creek Stables, managers, employees or agents for my own safety or for the safety of my minor child.

With the knowledge of the foregoing, and as an inducement for Cedar Creek Stables to allow me to ride or participate in competitions or clinics on their property, I hereby agree to waive or release any and all rights that I or my heirs may have to make a claim against the Cedar Creek Stables, their employees and participants, arising from any damages, injury, or death which I might sustain or which might occur to any horses. I further agree to indemnify and hold harmless all of the foregoing from any claims which I might make or which might be made on my behalf by others or which might be made against me by others, arising from riding on Cedar Creek Stables property. Furthermore, I agree to indemnify Melyni J. Worth, trading as Cedar Creek Stables, its employees, or participants, for any injury, death, loss, or damage to any personal property which might occur during an equine activity as defined by 3.1-796.130 of the Code of Virginia, 1950, as amended.

BY SIGNING THIS WAIVER AND RELEASE, I UNDERSTAND THAT I AM GIVING UP, (WAIVING AND RELEASING) ANY RIGHT I MIGHT HAVE TO SUE OR MAKE A CLAIM WHICH I MIGHT HAVE OR WHICH MIGHT SUBSEQUENTLY ARISE OR OCCUR AGAINST MELYNI J. WORTH, TRADING AS CEDAR CREEK STABLES, AND PARTICIPANTS, OR EMPLOYEES, FOR ANY INJURIES I MIGHT SUSTAIN WHILE HORSEBACK RIDING OR PARTICIPATING IN AN EQUINE ACTIVITY, AND THAT I AM INDEMNIFYING AND HOLDING HARMLESS MELYNI J. WORTH, TRADING AS CEDAR CREEK STABLES AND EMPLOYEES, FOR INJURING ANYONE ELSE OR ANY HORSE RIDDEN BY ANOTHER WHILE SO ENGAGED, IT IS MY INTENT TO GIVE UP THOSE RIGHTS AND PROVIDE THE HOLD HARMLESS AGREEMENT, AND I DO SO KNOWINGLY AND VOLUNTARILY.

Print Name: _____ Date: _____
Participant

Signature: _____ Date: _____
Client, Parent, or Guardian

Print Name: _____
Client, Parent, or Guardian

RIDE WITH PRIDE LIABILITY RELEASE



Participant (Print)
would like to participate in the Ride with Pride, Inc. program. I acknowledge the risks and potential risks of horseback riding. However, I feel that the possible benefits to myself/my son/my daughter/my ward are greater than the risk assumed. I hereby, intending to be legally bound, for myself, my heirs and assigns, executors or administrators, waive and release forever all claims for damages against Ride with Pride, Inc., its Board of Directors, Instructors, Therapists, Aides, Volunteers, and/or Employees for any and all injuries and/or losses I/my son/my daughter/my ward may sustain while participating in Ride with Pride, Inc.

Signature: _____ Date: _____
Participant

Signature: _____ Date: _____
Parent/Guardian (if participant under 18)

Printed Name: _____
Parent/Guardian (if participant under 18)

MEDIA RELEASE

I DO DO NOT

hereby consent to and authorize the use and reproduction by Ride with Pride, Inc. of all photographs, videos and any other audiovisual materials taken of me/my son/my daughter/my ward for promotional printed material, website, social media, educational activities, exhibitions or for any other use for the benefit of the program.



Signature: _____ Date: _____

Neighborhood Assistance Program (NAP)

Ride with Pride relies on funding to continue providing services. Help us receive support by answering the below questions to apply for NAP Credits:

Household Income: _____

Number of people who live in the household: _____

RIDE WITH PRIDE, INC.
P.O. Box 1203, Staunton, VA 24402-1203
AUTHORIZATION FOR EMERGENCY TREATMENT

In the event emergency aid/treatment is required due to illness or injury during the process of receiving services or while being on the property of the agency, I authorize Ride with Pride, Inc.:

1. Secure and retain medical treatment and transportation if needed.
2. Release client records upon request to the authorized individual or agency involved in the medical emergency treatment.

Student Name: _____ Phone: _____

Address: _____

In Case of Emergency: Contact: _____ Phone: _____

Contact: _____ Phone: _____

Physician' Name: _____ Phone: _____

Preferred Medical Facility: _____

Health Insurance Co. _____ Policy # _____

CONSENT PLAN

This authorization includes x-ray, surgery, hospitalization, medication, and any treatment procedure deemed "lifesaving" by the physician. This provision will only be invoked if the person listed above is unable to be reached.

Print Name: _____ Phone: _____

Client, Parent, or Guardian

Signature: _____ Date: _____

Client, Parent, or Guardian

NON-CONSENT PLAN

I do not give my consent for emergency medical treatment/aid in the case of illness or injury during the process of receiving services or while being in the property of the agency. In the event emergency treatment/aid is required, I wish the following procedures to take place:

Print Name: _____ Phone: _____

Client, Parent, or Guardian

Signature: _____ Date: _____

Client, Parent, or Guardian