

# VENUE WAIVER – Please print, sign and bring with you:

## Outback Station LLC

76231 Hwy 31 S LK LaPine OR 97739  
541-576-2442 ltribby@gmail.com Fax 541-576-2442  
RV Camping, Trail Rides

### RELEASE OF LIABILITY AND PARTICIPATION AGREEMENT

I hereby acknowledge that I have knowingly entered into equestrian training lessons and/or trail riding and/or pistol, rifle, shotgun, archery shooting sessions and/or zip line riding sessions, and any other activities conducted at Outback Station and acknowledge that I am bound by the terms and conditions of this Release and Participation Agreement between Outback Station, its employees and agents and myself and the persons with me, for whom I am responsible.

I further acknowledge and understand that no warranty or representation, expressed or implied, is being made by Outback Station as to the condition of any of the animals, materials, fixtures, equipment, trails, gates, fences, grounds, ponds, creeks and woods, cars, trucks, tractors, and/or any other vehicles, which may be used by me. I am familiar with safety rules regarding horses, firearms and the zip line and acknowledge that potential dangers exist in the use and participation in these activities, as well as all of the other activities conducted at Outback Station, which could result in property damage, personal injury or death, and I agree to abide by said rules at all times, and assume all risks involved in my participation in all of the activities of Outback Station.

In consideration of my being a participant in any of the above activities I hereby release Outback Station, its agents and employees from all liability for damages of any kind, including property damage, personal injuries, medical expenses, loss of wages, permanent disability, and further agree to hold harmless and indemnify Outback Station for any and all claims made against it (including attorney's fees incurred) as a result of any incident occurring while participating in any of the above activities. I further agree to assume the responsibility of all medical bills, if any, and not to institute any claim or lawsuit for damages alleged to have arisen out of my participation in the above activities. All of the terms of this release shall apply to my agents, employees, successors and assigns to the greatest extent possible.

As used in this release and participation agreement, the terms "I" and "myself" shall also apply to all other persons with me, for whom I am responsible.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Participant and additional persons covered by this release:

\_\_\_\_\_  
Adult/Guardian Printed Name

\_\_\_\_\_  
Adult/Guardian Signature

\_\_\_\_\_  
Agent, Outback Station

I also hereby agree and grant permission to Outback Station for use of video and/or still photography of me/us for their promotional materials.

Participants full address and telephone #:

\_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_ Email \_\_\_\_\_