# **Transportation Contract and Authorization Form**

## **AUTHORIZATION:**

I HEARBY AUTHORIZE THE TRANSPORTATION OF MY HORSE(S). I UNDERSTAND THAT ALL PROFESSIONAL CARE WILL BE TAKEN TO ENSURE THE SAFTEY AND WELL BEING OF MY HORSE(S) AND AUTHORIZE VETERINARY CARE AT MY EXPENSE SHOULD IT BECOME NECESSARY.

NAME OF HORSE(S):	
PRINTED NAME OF OWNER: _	
SIGNATURE OF OWNER:	DATE:

## **RELEASE:**

Owner hereby voluntarily releases and forever discharges Erin Risso (Transporter) and any other Designated Drivers (Drivers appointed by Erin Risso), from any and all liabilities, claims, demands, actions or rights of actions, which are related to, rise out of, or are in any way connected with the transport of aforementioned horse(s) including, but not limited to the negligent acts or omissions of the Transporter or Designated Drivers for any and all injury, illness or disease, and damage to aforementioned horse(s) including all third party claims. Owner further agrees, promises and covenants not to sue, assert, or otherwise maintain or assert any claims against the Transporter or Designated Drivers, for any injury, death, disease or damage by third parties. The Owner agrees to secure equine insurance and assumes all expenses or liabilities associated with the transport or care of the aforementioned horse(s). Owner hereby holds harmless Erin Risso and other Designated Drivers for any liability that would incur for property damage or bodily injury to any horse(s) and owner/passenger loading, transporting, unloading or handling the aforementioned horse(s).

#### **TRAILER DAMAGE:**

Owner agrees to be responsible for any and all damages to trailer caused by Owner's horse(s). Owner will be held accountable for all costs associated with such damage and repairs.

#### **ENTIRE AGREEMENT:**

Owner understands that this entire agreement between the Owner and Erin Risso and the other Designated Drivers, and it supersedes and cannot be modified or changed in anyway.

MY SIGNATURE BELOW INDICATES THAT I HAVE READ THIS ENTIRE DOCUMENT, UNDERSTAND IT COMPLETELY, AND AGREE TO BE BOUND BY ITS TERMS IN ITS ENTIRETY. PRINTED NAME OF OWNER: \_\_\_\_\_

SIGNATURE OF OWNER: \_\_\_\_\_\_ DATE: \_\_\_\_\_\_

# Equine Release of Liability, Training Contract, and Care Authorization Form

# **CONTRACT:**

Owner places their horse(s) into the care and Training Program of Erin Risso.

Name of Horse(s):		
Printed Name of Owner:		
Program Begins:	_ Program Ends:	
Number of Training Rides per Week:		
Additional Criteria:		

## **RELEASE OFLIABILITY:**

(1) Owner understands that they are enrolling into this Training Program at their own risk and agrees that any injury, illness, disease, death, or damage obtained by Owner's horse(s) and/or equipment will be the Owner's responsibility and hereby voluntarily releases and forever discharges Erin Risso from any and all liabilities, claims, demands, or actions which are related to or in any way connected to the Training Program.

Name of Horse(s): \_\_\_\_\_\_

Signature of Owner: \_\_\_\_\_\_ Date: \_\_\_\_\_\_

(2) Erin Risso, Trainer, understands the risks involved with this Training Program and hereby frees Owner of above Horse(s) of any liability or claim as a result of any and all bodily injury involving said Horse(s).

Signature of Trainer:	Date:
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#### **CARE AUTHORIZATION:**

Owner gives Erin Risso, Trainer, authorization to provide Emergency Care through a licensed professional at Erin Risso's discretion to said Horse(s). This could include, but is not limited to, Emergency Veterinary Care, Emergency Farrier Care, etc. Owner agrees to be responsible for any and all costs accrued by said Emergency Care and agrees to withhold any and all liability for any costs from Erin Risso.

Name of Horse(s):	
Signature of Owner:	Date: