



**KRUEGER STABLES, LLC.**  
**AT THE GRAND GENEVA RESORT AND**  
Rider Registration

Name \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email: \_\_\_\_\_

How many in your party? \_\_\_\_\_ Where are you staying? \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

**ACKNOWLEDGEMENT OF RISK AND LIABILITY RELEASE**

The undersigned(rider) in consideration of the agreement of Krueger Stables, LLC at the Grand Geneva(Provider) to permit the Rider to ride horses owned or furnished by the Provider, hereby states, represents, and agrees as follows:

**Representation as to physical condition:** Rider represents that his or her physical condition is such that horseback riding will pose no hazard to health or well being of rider.

**Acknowledgement and Acceptance of Risk:** Rider understands and acknowledges the risk, hazards, and dangers inherent in horseback riding both known and unknown which could result in injury, death, illness or disease and that such hazards may occur without anyone including the Providers of such horses, being at fault. Being fully aware of these risks, the undersigned nevertheless desires to ride the horses and hereby accepts any and all risks to the undersigned, to any third person, or damage to the property of anyone including the Provider of tack and horses.

**Release from Liability:** By reason of the Rider's acknowledgement and acceptance of the risks of using the Provider's horses and consideration of the Provider's willingness to permit, the Rider hereby knowingly and voluntarily releases, forever discharges, and agrees to hold harmless and indemnify the providers and their respective agents, employees, and all other persons or entities affiliated with Provider. Further, the Rider agrees, promises, and covenants not to sue, assert or otherwise maintain any claim against the Provider for injury, death, illness or for property damage arising from the use of the horses.

**Attorney Fees, Indemnification:** In the event the Providers are required to obtain counsel and or incur any expense in enforcing their rights under this Agreement, whether by reason of claim against them by the Rider or by third party persons by reason of rider's negligence. Riders agree to pay all such costs and attorney fees so incurred should Provider be successful in whole or in part, in defending such claims or in prosecuting their own claims as the case may be. Rider agrees to hold harmless and indemnify Providers and their respective agents, employees and any and all persons and entities associated therewith from such costs, expenses, and attorney fees whether or not suits filed judgment is rendered thereon, or appeal is taken there from.

**Warning:** Under Wisconsin Law, an equine professional is not liable for any injury to or the death of a participant in equine activities resulting from the inherent risk of equine activities, pursuant to section 895.481. Wisconsin Revised Statutes.

Rider Signature \_\_\_\_\_ Date \_\_\_\_\_

If rider is under the age of 18 years, parent or guardian must sign below: I have read the foregoing Acknowledgement of Risk and Liability Release and hereby affirm the representations made and agree to the terms of such instrument on behalf of the rider whose name and signature appears above.

Parent/guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name of Minor \_\_\_\_\_ Is address same as above?  Yes  No

If no, Address \_\_\_\_\_