



**June 4-6, 2010 Ironwood Springs Women's Equestrian Retreat Registration**

Please send completed forms and payment to...  
**Ironwood Springs Christian Ranch, 7291 County Road 6 SW, Stewartville, MN 55976**

**Participant's Information**

Name \_\_\_\_\_ Age \_\_\_\_\_ (must be 18 or older)  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email \_\_\_\_\_  
Home Phone(     ) \_\_\_\_\_ Work(     ) \_\_\_\_\_ Cell Phone(     ) \_\_\_\_\_

**Horse Information**

**Please fill out this section ONLY if you are bringing your own horse.** \*\*A reminder that your horse should be broke to ride in an arena and on the trail without causing problems (for yourself or for other riders and their horses). We understand that horses are unpredictable at times... especially in new environments. But safety is a priority and we are trusting that your horse is not coming to the retreat with significant problems.

Horse's Name \_\_\_\_\_ Breed \_\_\_\_\_ Age \_\_\_\_\_ Mare/Gelding  
Training \_\_\_\_\_ Primary Use \_\_\_\_\_

\*\*Please include a copy of a Negative Coggins or bring one with you on the day of registration\*\*

**MEDICAL INFORMATION**

**Authorization for Emergency Medical Treatment CONSENT PROVISION:** In the event emergency medical aid/treatment is required due to illness or injury during the process of receiving services, or while being on the property of Ironwood Springs Christian Ranch, I authorize Ironwood Springs to secure and retain medical treatment and transportation if needed, and to release client records upon request to the authorized individual or agency involved in the medical treatment. This authorization includes x-rays, surgery, hospitalization, medication, and any treatment deemed 'life saving' by the physician. This provision will only be invoked if the client (student or volunteer) is unable to communicate. **Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Insurance information:** Medical Ins Co. \_\_\_\_\_ Policy #: \_\_\_\_\_  
Doctor \_\_\_\_\_ at \_\_\_\_\_ (clinic). Phone: \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ Emergency Contact's Phone: \_\_\_\_\_

Are you taking any medications that you would like the equine staff to be aware of? \_\_\_\_\_

Allergic reactions/allergies to medications? \_\_\_\_\_

**Physical Requirements** Although Ironwood Springs has many programs for those with mental and physical disabilities, the Women's Equestrian Retreat is for able-bodied participants. For other programs, call 507-533-9933

I \_\_\_\_\_ (participant's name) understand and agree to the following requirements in order to participate in the Women's Equestrian Retreat at Ironwood Springs.

**Weight Restriction.** I understand that for the safety of myself, the rider, and for the consideration of the horses, Ironwood Springs has set a weight limit of 225# or less for the horse program. I weigh 225# or less. \_\_\_\_\_ (please initial)

**Mental and Physical Disabilities** I understand that in order to participate in the Women's Equestrian Retreat at Ironwood Springs, that I need to meet the following requirements... I am able to mount the horse from the ground with a mounting block, I am able to keep both feet in the stirrups of the saddle at all times, I will be able to see, hear, and understand the instructors clearly both in the arena and on the trail. \_\_\_\_\_ (please initial)

## Liability Release

\_\_\_\_\_ (*name of participant*) would like to participate in the Ironwood Springs Christian Ranch Women's Equestrian Retreat. I acknowledge the risks and potential for risks of horseback riding and working around horses. However, I feel that the possible benefits to myself are greater than the risk assumed. I hereby, intending to be legally bound, for myself, my heirs and assigns, waive and release forever all claims for damages against: Ironwood Springs Christian Ranch and-its Board of Directors, Instructors, Volunteers, and Employees for any and all injuries and/or losses that I may sustain while participating in Ironwood Springs Christian Ranch affiliated activities and special events of any kind.

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

### **Minnesota Equine Liability Law Sec 3 (604A.12) LIVESTOCK ACTIVITIES: IMMUNITY FROM LIABILITY**

#### **Subdivision 1. Definitions.**

- a. For purposes of this section, the following terms have the meanings given them.
- b. "Inherent risks of livestock activities" means dangers or conditions that are an integral part of livestock activities, including: (1) the propensity of livestock to behave in ways that may result in death or injury to persons on or around them, such as kicking, biting, or backing; (2) the unpredictability of livestock's reaction to things like sound, sudden movement, unfamiliar objects, persons, or other animals; (3) natural hazards such as surface or subsurface conditions; or (4) collisions with other livestock or objects.
- c. "Livestock" means cattle, sheep, swine, horses, ponies, donkeys, mules, hinnies, goats, buffalo, llamas, or poultry.
- d. "Livestock activity" means an activity involving the maintenance or use of livestock, regardless of whether the activity is open to the general public, provided the activity is not performed for profit. Livestock activity includes: (1) livestock production; (2) loading, unloading or transporting livestock; (3) livestock shows, fairs, competitions, performances, races, rodeos, or parades; (4) livestock training or teaching activities; (5) boarding, shoeing, or grooming livestock; or (6) riding or inspecting livestock or livestock equipment.
- e. "Livestock activity sponsor" means a person who sponsors, organizes or provides the facilities for a livestock activity that is open to the general public.
- f. "Participant" means a person who directly and intentionally engages in a livestock activity. "Participant" does not mean a spectator who is in an authorized area.

**Subdivision 2. Immunity from Liability, except as provided in subdivision 3, a nonprofit corporation, association, or organization, or a person or other entity donating service, livestock, facilities, or equipment for the use of a nonprofit corporation, association, or organization, is not liable for the death or injury to a participant resulting from the inherent risks of livestock activities.**

**Subdivision 3. Exceptions.** Subdivision 2 does not apply if any of the following exist: (1) the person provided livestock for the participant and failed to make reasonable efforts to determine the ability of the participant to safely engage in the livestock activity, or to determine the ability of the participant to safely manage the particular livestock based on the participant's representations of the participant's ability; (2) the person provided equipment or tack for the livestock and knew, or should have known, that it was faulty to the extent that it caused injury or death; (3) the person owns or leases the land upon which a participant was injured or died because of a man-made dangerous latent condition and failed to use reasonable care to protect the participant; (4) the person is a livestock activity sponsor and fails to comply with the notice requirement of subdivision 4; or (5) the act of omission of the person was willful or negligent.

**Subdivision 4. Posting Notice.** A livestock activity sponsor shall post plainly visible signs at one or more prominent locations in the premises where the livestock activity takes place that include a warning of the inherent risks of the livestock activity and the limitation of liability under this section.

I have read and/or been informed of the Minnesota Equine Liability Law. Signature \_\_\_\_\_ Date \_\_\_\_\_

**Photo and Publicity Release** I consent to and authorize the use and reproduction of any and all photographs and audiovisual materials taken of me for promotional printed material or for any use to benefit the programs at Ironwood Springs Christian Ranch. \_\_\_\_\_ (please initial)

## Payment Information

\_\_\_\_\_ \$225 Women's Equestrian Retreat

\_\_\_\_\_ \$45 Bringing a Horse

\_\_\_\_\_ **Total Amount**

### **Payment Options**

Check # \_\_\_\_\_

Credit Card (we do not accept debit cards) Visa or MasterCard Card # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Amount: \$ \_\_\_\_\_ Security Code \_\_\_\_\_ Zip Code \_\_\_\_\_ Signature \_\_\_\_\_

**\*\*All registrations require a \$100 non-refundable deposit. Cancellations made two or more weeks prior to the first day of your camp session will receive a refund of their payment less the \$100 non-refundable deposit. Cancellations made less than two weeks prior to the first day of your camp session will receive no refund.**

Thank you for registering for the Women's Equestrian Retreat at Ironwood Springs Christian Ranch. We will send out a confirmation letter with more detailed information. If you have questions you can contact us at 507-533-9933 or at [courtney@ironwoodsprings.com](mailto:courtney@ironwoodsprings.com)

God Bless,

Jonathan and Courtney Mohler