



Hope Remains Youth Ranch

Where the Youth of Today Find Hope for tomorrow!

Post Office Box 160782 ~ Boiling Springs, SC 29316 ~ 864.921.2352 ~ www.HopeRemains.org

SUMMER CAMP REGISTRATION

Date _____

Child's Name _____ age _____

Parent's Name _____

Address _____

Parent's cell _____ home _____ work _____

Emergency Contact _____

Health Issues of child (allergies, medications)

Last date of child's physical _____

Physicians Name and number _____

Release Form for Hope Remains Youth Ranch

State of South Carolina) Hope Remains Youth Ranch

County of Spartanburg Waiver of Liability For Guest of Sponsor

I _____, in consideration of the extension of rights to use these specific equestrian areas and facilities do hereby agree that I am aware that these areas and facilities I will be using are owned by equine sponsors and are subject to the South Carolina Equine Act limiting equine sponsors from liability. I have been given a copy of this Act and I have read and understand this Act.

South Carolina - Warning - Under South Carolina law, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in an equine activity resulting from an inherent risk of equine activity, pursuant to Article 7, Chapter 9 of Title 47, Code of Laws of South Carolina, 1976.

Notice - This is an Equine Facility. All activities on these grounds are subject to the Equine Inherent Risk Law S.C. Code Annotated 47-9-7. By your presence on these grounds you have indicated that you have accepted the limits of liability resulting from inherent risks of equine activities. I agree that my use of the Trail system, Training Arena, Barn, Horses, farm equipment, and any other portions of the property or facilities will be an Equestrian Activity as previously described. Accordingly, I agree to hold the Equine Sponsors consisting of the undersigned sponsor and all individual property owners harmless should I be injured in any way while on their respective properties.

Parental Release for Child to participate in activities at Hope Remains Youth Ranch

Print Name of Child _____ **Date** _____

Print Name of Parent _____ **Date** _____

Signature of Parent _____ **Date** _____

Insurance Name and Phone number _____

Use of the Equestrian Trail System and Equestrian Arena and any portions of the property or facilities shall be for the pleasure of the user only and shall be at the user's own risk. The Owners/Hope Remains Youth Ranch shall require that anyone who uses any of these facilities sign this hold-harmless form that (a) acknowledges having read the SC Equine Act, (b) acknowledges assumption of risk, (c) agrees to hold harmless and indemnify the Property Owners/Hope Remains Youth Ranch from any liability that may occur as a result of their use.