

Longview Ranch, Inc.
190 Bledsoe Hollow Lane Mosheim, TN 37818
(423) 636-0032
www.longviewranch.com

Release of Liability for _____
Print Participant Name Here

I understand that the individual named above will be attending Long View Ranch and will be participating in various camp programs that may include outdoor recreational activities. Camp activities may include but are not limited to: individual and group sports activities, swimming, river tubing, skiing, canoeing, horseback riding, paintball games, mountain biking, participation in obstacle courses, off site ropes courses, hiking and other recreational activities. Camp activities may occur at Long View Ranch or at such other specified facilities/locations that Long View Ranch has determined are appropriate for conducting those activities. I understand that these activities have inherent risk, dangers and hazards. I also understand that under **Tennessee Law, an equine professional is not liable for an injury to or the death of a participant in equine activities resulting from the inherent risk of equine activities pursuant to the Tennessee Code Annotated, Title 44, Chapter 20.** I understand that there is a 225lb rider weight limit for horseback riding. I affirm that the participant attending is in good health, that they are not under a physician's care for any condition that bears upon their fitness to participate in camp activities and to my knowledge there are no other conditions that would preclude individuals from participation in the camp activities. In consideration of Long View Ranch allowing the above named group to attend the camp, I hereby release Long View Ranch, Inc., its owners, management, and staff from any and all liability for any injury related to attendance and/or lodging at the camp, and participation in any camp or camp sponsored programs. I understand that the group may be photographed or filmed while participating in camping activities and that these photographs or film may be used in print or in other media to promote Long View Ranch.

I hereby attest that I am the individual named above or the parent / legal guardian of the individual named and that I have the authority to grant this waiver and release of liability.

_____ Date _____
Participant Signature (If age 18 or older)

_____ Date _____
Signature of parent or legal guardian if participant is a minor

Print name of parent or legal guardian if participant is a minor