



Authorization for Emergency Medical Treatment Form

Rider Full Name: _____ DOB: _____ Age: _____
Best Phone: _____ Best Email: _____
Street Address: _____
City: _____ State: _____ Zip: _____
Physician's Name: _____ Physician's Phone: _____
Health Insurance Company: _____ Medical Facility: _____

Allergies to medications: _____
Current medications: _____

In the event of an emergency, contact:

Name: _____ Relation: _____ Phone: _____
Name: _____ Relation: _____ Phone: _____
Name: _____ Relation: _____ Phone: _____

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 the agency, I authorize RED Arena to :

1. Secure and retain medical treatment and transportation if needed.
2. Release medical records upon request to the authorized individual or agency involved in the medical emergency treatment.

Consent Plan

This authorization includes x-rays, surgery, hospitalization, medication and any treatment procedure deemed "life saving" by the physician. This provision will only be invoked if the person(s) above is unable to be reached.

Date: _____ Consent Signature: _____
Client, Parent or Legal Guardian

Non-Consent Plan

I do not give my consent for emergency medical treatment/aid in the case off illness or injury during the process of receiving services or while being on the property of the RED Arena. In the event emergency treatment/aid is required, I wish the following procedures to take place:

Date: _____ Consent Signature: _____
Client, Parent or Legal Guardian



SAFETY FIRST! There are inherent dangers to being outdoors and near horses. To keep our riders, volunteers, therapists, instructors, visitors and horses safe, please adhere to these guidelines and be considerate to our zeal for safety.

- Remain in the fenced waiting area.** Off limit areas include the arena, the ramp, the area and driveway to the right of the arena, the barn, the trails.
- Only participants wearing correctly fitted, approved helmets may enter the arena when accompanied by a Therapist or Instructor.
- There is **NO SMOKING** anywhere on property.
- DO NOT THROW** objects (toys, balls, RED Arenas) in waiting area, near or into the arena.
- DO NOT CLIMB** on arena or any fences.
- DO NOT RUN** in the waiting area, parking area, in or near the arena.
- All children must be directly supervised at all times on the property.
- Personal pets are not allowed on the property, with the exception of service dogs.
- This is a private property, there is no admittance outside of scheduled sessions unless prior authorization is obtained from the property owners.
- Never hand feed the horses.

UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE AND REMEDIES CODE), AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES.

PHOTO RELEASE

Please check ***I DO or DO NOT*** Consent to and authorize the use and reproduction by **RED Arena, Inc** of any and all photographs and any other audio/visual materials taken of me/my child for promotional material, educational activities, exhibitions, website or for any other use for the benefit of the program.

Participant/Parent Signature: _____ Date: _____

Welcome to the RED-Y to Read Program

Please call or text the barn phone at 512-618-5154 if you are running late or need to cancel or reschedule.

Sessions canceled with more than 2 hours notice can be rescheduled or credited back to you.

Sessions canceled with less than 2 hours notice will be charged.

Please be sure your child wears sturdy close toed shoes and comfortable clothing. Sandels and flipflops are not safe to wear around horses.

You are welcome to bring a favorite book, please be sure it's appropriate for thier reading level or we have many books to choose from.

Please note on the "Waiver of Liability" form, you will need too sign the middle of the page if you choose for your child to not wear a helmet while reading to the horses. We do have helmets availalbe here to borrow if you would like your child to wear one.

Please do not bring treats for the horses.

Parents and sibling will need to remain in the family waiting area during the reading session.

We look forward to empowering your child through reading to the horses!

We welcome your suggestions and feedback! Please contact Jennifer Young, PT at 512-807-6505 or info@REDarena.org



Waiver of Liability for RED Arena, Inc.

In consideration of my visiting and utilizing the land and facilities of Red Arena, I (parent name) _____,

Legal Guardian of _____ (if parent signing for a minor) hereby freely

agree to and make the following contractual representations and agreements. I fully realize the dangers of participating near horses, in horseback riding, grooming, tacking, leading as well as participating in all activities at RED Arena, including but not limited to reading, job training, volunteering, employment, walking and camps. I fully assume the risks associated with such participation including, by way of example and not limitations, the following: the dangers of falling off and breaking a limb, collisions with other horses, golf cart use, fence posts, gates, other riders, other horses, fixed and moving objects; the dangers arising from surface hazards, equipment failure, inadequate safety equipment and weather conditions; the dangers of contact with biting insects, reptiles, and mammals; the dangers of participating in any play activity including drowning in the tank of the property; and the possibility of serious physical and/or mental trauma including death.

I hereby waive, release, and discharge for myself, my heirs, executors, administrators, legal representatives, assigns and successors in interest (hereinafter collectively termed "successor") any and all right and claims which I have or which may hereafter accrue to me against Red Arena, Jennifer Young, David Young, Board of Directors, any of their employees, contractors, volunteers, designates or heirs, any property owners, law enforcement agencies, all public entities, special districts and properties (and their respective agents, officials and employees) through or by which the events will be held for any and all damages which may be sustained by me directly or indirectly in connection with , or arising out of my participating with activities at Red Arena of travel to or from Red Arena.

I agree that it is my sole responsibility to be familiar with the arena and the programs that I am/my child is attending. I understand and agree that situations may arise during participating in activities at Red Arena that may be beyond the immediate control of the property owners and I must partake in any and all activities so as to neither endanger others or myself. I accept responsibility for the condition and adequacy of my horse equipment and any other related personal equipment used at Red Arena. While riding a horse at Red Arena and any of the adjoining properties being utilized or leased by Red Arena, I/ my child will wear an ANSI, SNELL, or ASTM rated helmet, properly affixed to my/my child's head, and I assume all responsibility and liability for the selection and fit of such a helmet.

I, (parent or adult rider) _____ fully understand the risks and choose NOT to wear a helmet/have my child wear a helmet while near horses for the RED-Y to Read program as my child will not be riding a horse.

I have no physical or mental condition which to my knowledge would endanger myself or others if I participate in these events, or on these premises of Red Arena, or would interfere with my ability to participate in activities at Red Arena.

I agree for myself and my successors, that the above representations are contractually binding, and are not mere recitals, and that should I or my successors assert my claim in contravention of this agreement, I or my successors shall be liable for all the expenses (including legal fees) incurred by the other party or parties in defending his, her or themselves against my claim.

This agreement may not be modified orally and a waiver of any provision shall not be construed as a modification of any other provisions herein or as consent to any subsequent waiver or modification.

WARNING: UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE AND REMEDIES CODE), AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES.

Date: _____

Signature of Adult Participating

PARENT OR GUARDIAN OF MINOR: I as parent or guardian of the below named minor, hereby give my permission for my child or ward to participate in activities at Red Arena, 1601 Bell Springs Rd, Dripping Springs TX 78620, and further agree, individually and on behalf of my child to the terms of the above.

Date: _____

Signature of Parent or Guardian

Including all visitors with me on the property please fill in below :
Printed Names:

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

All persons participating on or near the horses must have an Authorization of Medical Treatment on file.