



**MALU'OLU Riding Club, Promised Land Farm, LLC
41-426 Hihimanu Street, Waimanalo, Hawaii, 96795**

Equine Emergency Medical Release Form

In the event of an emergency situation, where in the opinion of the lessee, Malu'Olu Riding Club ("Riding Club"), a Hawaii Non-Profit Corporation, or the lessor, Promised Land Farm, LLC, a Hawaii limited liability company ("Lessor"), it is deemed critical to obtain immediate medical, farrier or other attention for any one or more of my horse(s) boarded there, the undersigned hereby authorizes the Riding Club and/or the Lessor to contact my equine veterinarian or, if appropriate, my farrier, as shown in Riding Club records, to obtain such immediate attention.

If my veterinarian or farrier cannot be reached or is unable to respond promptly, the undersigned hereby authorizes the Riding Club and/or the Lessor to contact any equine veterinarian or Ferrier to obtain such immediate attention.

The undersigned will indemnify, defend and hold the Riding Club and/or the Lessor harmless for any negative outcome that may occur from their action or inaction on my behalf during such emergency situation.

The undersigned agrees to be responsible for payment of any and all costs and expenses incurred in connection with such emergency, including those advanced or incurred by the Riding Club and/or the Lessor.

Horses Name(s): _____

Veterinarian _____

Farrier _____

Signature: _____

Printed Name: _____

Date: _____

Witness: _____