



Child Participant Release of Liability Form

Counseling & Psychotherapy
818 NW 17th Avenue, Portland, Oregon 97209
Phone: 503-221-4531 • Fax: 503-263-6278
www.AllianceCounselingCenter.org

I, (parent/guardian) _____
for and in consideration of the agreement of Alliance Counseling Center, to provide Animal Assisted Activities/
Animal Assisted Therapy to (child participant) _____
do hereby forever release, acquit, discharge and hold harmless Alliance Counseling Center, Inc., (ACC)
Harmony in Motion, (HM) Heron Hill Arabians, (HHA) its officers, trustees, agents, employees,
representatives, successors and assigns, for all manner of claims, demands, and damages of every kind
and nature whatsoever, which the undersigned or said minor may now, or in the future, have against,
its officers trustees, agents, employees, representatives, successors or assigns on account of any personal
injuries, physical or mental condition, known or unknown, to the person of said minor and the treatment
therefore as a result of, or in any way growing out of, the acts of ACC, HM, HHA its officers, trustees,
agents, employees, representatives, successors or assigns, including but not limited to, their negligence
or gross negligence, in rendering the services above described or in any way incidental thereto.

UNDER OREGON LAW, AN EQUINE ACTIVITY SPONSOR IS NOT LIABLE FOR AN INJURY TO, OR
THE DEATH OF, A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF
EQUINE ACTIVITIES THAT ARE OBVIOUS AND NECESSARY.

Participant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Program Personnel Signature: _____ Date: _____

The clinical staff of Alliance Counseling Center