Mule Shoe Outfitters, LLC Kendall Valley Lodge

P.O. Box 1555 Lodge Phone 307-367-2223 Pinedale, WY 82941 1-888-803-7316



info@kendallvalleylodge.com info@muleshoeoutfitters.com

Date Reserv	ation Taken:	(Initials)		
Contact Name		email		
Contact Pho	one ()			
Date(s):	Time:	Activity:		
Destination_		***full charge	if not cancelled within 24hours	s of trip date
Guided Trail	Rides from the Kendall Valle	ey Lodge (Helmets required 6-8 y	yr old-recommend up to 10yr old) #persons
1 hour ride	\$60.00 per person		per person	,
Half Day	\$290.00 per person	3 to 4 hours approx	prefer to start at 8:00 am for	
Full Day	\$460.00 per person	0.1.01	half & full day rides	
Guided Trail	Rides away from the Lodge	to other Trailheads #persons	S	
Half Day		<u> </u>		
Full Day	\$650.00 per person			
****we use the	New Fork Trailhead-other traill	heads will incur an addition fuel	surcharge for extended travel	
Wilderness I	Fishing/Pack Trips full serv	vice - 12 persons max #pei	rsonsx #days	_=/day
1-4 people \$4	50.00 per person per day			
5+ people \$3	375.00 per person per day			
Gear Drops	(one way pricing) pack-in a	nd pack-out count as 2 Gear	drops #drop	os
Base Rate Fe	ee \$800 1-2 persons			
Add \$200.00	per each pack animal	_	#pack animals x \$200.00	
Aver	age 2 person per pack anima	al 150lbs limit/pack anima	I	
Spot Packs	one way pricing) pack-in ar	nd pack-out count as 2 trips	#persons riding #pa	ick animals
Base Rate Fee \$ 800.00			#trips	
Add \$200.00	per pack or riding animal	# an	imals x \$200.00	
Aver	age 2 person per pack anima	al 150lbs limit/pack anima	al .	
**more remo	te distances may require ad	ditional fees		
			Total Due	\$
	ubject to change	ity a signed Participant Activity \	Noiver is required	
10 participate	in any guided norsepack activi	ity a Signed Participant Activity 1		¢
		reservations. Deposit received confirm		Ψ
reservation of desired dates and activity. Deposits are extenuating circumstances. Balance is due in full prior to			Balance Due	\$
****	servations require a credit o	oord on file to hold dates	Date Paid	#
	CARD INFORMATION:	Visa MC Discover	American Express	
Name on Ca	ard:	Credit C Expiration date:	ard #:	
	Zip Code	Expiration date:	CVC Co	de:
Authorized S	Signature:		Date	

All person(s) participating in any horseback guided activity must sign.
All person(s) Horseback riding please provide Height, Weight, and Age.

Participants under 18 years must have parent sign.

RISKS, HAZARDS, AND DANGERS

The following describes some, but not all of said Risks, Hazards, and Dangers.

- The propensity of the riding animals to behave in ways that may result in injury, harm, or death to persons on or around them.
- The unpredictable of the animals' reaction to such things as sounds, sudden movement, and unfamiliar objects, persons, or other animals.
- Certain hazards such as surface and sub-surface conditions.
- Collision with other animals or objects.
- The potential of the participant to act in a negligent manner that may contribute to injury to the participant or others.
- Encounters with variations within the terrain, including creeks, water, bridges, traveled roads, stumps, forest growth, debris, rocks, cliffs, and other obstacles whether they are obvious or not obvious, man-made or natural..
- Encounters with wildlife and insects.
- Temperature extremes and adverse unpredictable weather conditions.
- The unavailability of immediate professional (EMTs, MDs) medical attention in the designated riding area. (Guides are CPR/1st Aid certified).

PARTICIPANT'S ACKNOWLEDGEMENT OF RISK WAIVER

I recognize that there is an element of risk in any adventure, sport, or activity associated with the outdoors. I am fully cognizant of the risks and dangers inherent in such activities and have been informed of some known special hazards in such activity. A copy of a notice describing some, but not all, of such hazards as stated above and made a part hereof, and I have read and understand such hazards. I certify that I am fully capable of participating in the said activity.

Certain risks cannot be eliminated without destroying the unique character of this activity. The same elements that contribute to the unique character of this activity can be causes of loss or damage to my equipment, or accidental injury, illness, or in extreme cases, permanent trauma or death. Therefore, I assume full responsibility for personal injury to myself (participant) and for loss or damage to my personal property and expenses thereof as a result of my (participants') negligence of participating in said activity. I (participant) further understand that Mule Shoe Outfitters, LLC reserves the right to refuse any person it judges to be incapable of meeting the rigors and requirements of participating in the activity of horseback riding in the designated area.

I have read, understand, and accept the terms and conditions stated herein and acknowledge that this agreement shall be effective and binding upon the parties during the entire period of participation of said activity.

<u>Signature</u>	Horseback I	Horseback Riding Information			Riding Experience	
Name:	Height	Weight	Age	_ Yes	No	
Name:	Height	Weight	Age	_ Yes	No	
Name:	Height	Weight	Age	_ Yes	No	
Name:	Height	Weight	Age	_ Yes	No	
Name:	Height	Weight	Age	_ Yes	No	
Name:	Height	Weight	Age	_ Yes	No	
Name:	Height	Weight	Age	_ Yes	No	
Name:	Height	Weight	Age	_ Yes	No	
Name:	Height	Weight	Age	_ Yes	No	
Name:	Height	Weight	Age	_ Yes	No	
Name:	Height	Weight	Age	_ Yes	No	
Name:	Height	Weight	Age	_ Yes	No	