



LIGHTNING STABLES

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## SIGNER STATEMENT OF AWARENESS

I/WE THE UNDERSIGNED, HAVE READ AND DO UNDERSTAND THE FOREGOING AGREEMENT, WARNINGS, RELEASE AND ASSUMPTIONS OF RISK. I/WE FURTHER ATTEST THAT ALL FACTS RELATING TO THE APPLICANT ARE TRUE AND ACCURATE.

\_\_\_\_\_ DATE \_\_\_\_\_  
SIGNATURE OF RIDER (Parent must sign for rider 17 & under)

\_\_\_\_\_ for \_\_\_\_\_  
SIGNATURE OF PARENT, or GUARDIAN (Please Print)

DATE \_\_\_\_\_

Address in Full \_\_\_\_\_

Home Phone # \_\_\_\_\_ Office Phone # \_\_\_\_\_

Cell Phone # \_\_\_\_\_

Mailing Address: P.O. Box 2466 Gilroy, CA 95021