

PEARL RANCH, LLC

Margot Luckman, M.S., L.C.P.C., C.R.C., C.M./F.
2305 Duncan Drive
Missoula, Montana 59802

Telephone: 406-542-0820
Facsimile: 406-542-0843
email: pearlranch@live.com

Agreement for Services

I, (participant) _____ for and in consideration of the agreement of Pearl Ranch, LLC, to provide Animal Assisted Activities/Animal Assisted Therapy and/or Group Learning Activities for myself and/or members of my family, attest that I have received, read, and agree to the statements, terms and conditions in the following documents (please initial before each document):

_____ Release of Liability Agreement – to include all members of my family

_____ Photo and Publicity Release

_____ Horse Related Activities Come with This Warning

_____ Introduction to the Therapeutic/Learning Program

_____ Clothing List for Equine Activities

_____ Office/Ranch Policy

_____ Participant's Medical History/Signed Statement

_____ Authorization for Emergency Medical Treatment

_____ I am also notified that if I choose not to consent to Emergency Medical Treatment on the part of Pearl Ranch, LLC, staff, who are trained in First Aid and CPR, I may be refused participation in Equine activities.

Signature of Participant

Date

Signature of Parent/Guardian if Participant is a Minor

Date

Signature of Program Personnel/Registration Representative

Date

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Participant Release of Liability Agreement

I, for and in consideration of the agreement of Pearl Ranch, LLC, to provide Animal Assisted Activities/Animal Assisted Therapy myself, do hereby forever release, acquit, discharge and hold harmless Pearl Ranch, LLC, its members, 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 may now, or in the future, have against Pearl Ranch, LLC, its members, officers trustees, agents, employees, representatives, successors or assigns on account of any personal injuries, physical or mental condition, known or unknown, to the undersigned and the treatment therefore as a result of, or in any way growing out of, the acts of Pearl Ranch, LLC, its members, 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 MONTANA 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. PURSUANT TO SEC. 3, CH. 119, L. 1993. 27-1-727 OF THE MONTANA STATE CODE.

PHOTO & PUBLICITY RELEASE (Optional):

I hereby consent to and authorize the Pearl Ranch, LLC to use my/my child's/my ward's name in all audio, visual and written promotional material and to use and/or reproduce any and all photographs and any other audiovisual materials taken of me/my child/my ward for promotional printed material, educational activities, exhibitions or for any other use for the benefit of the program.

Participant Signature

Date

Parent/Guardian Signature if Participant is a Minor

Date

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Clothing List for Equine Activities

ALL sessions involving equine-assisted mental health sessions are held outdoors, or in a barn or arena when available. As such, you are exposed to unheated buildings and unpredictable weather conditions. It is **IMPERATIVE** that you dress appropriately. Below is a list of weather conditions and suggested apparel. Please note – there are no extra jackets, sweaters, boots, etc. at our facility. It is better to over-dress and be able to remove clothing than it is to underdress and become chilled or uncomfortable. It is always advisable to wear sunscreen on exposed parts of the body. Please remember that you are dressing to work outside and with a horse – conditions are sometimes muddy and dirty. Very casual, warm and comfortable clothing is always appropriate. Even in the summer time, long pants (not shorts) are recommended in the barn or with the horse. Baggy pants are not permitted – you need to be able to move freely with no fear of tripping, falling, or becoming tangled in props or equipment because of excess clothing.

COLD WEATHER

Wear layers of clothing: shirts, turtlenecks, sweaters, jackets, etc. Please wear multiple pairs of socks and warm, waterproof shoes or boots. Even if the weather is moderate, the ground may be cold, muddy or damp. Please wear a hat and make sure that your hands are covered. Gloves are preferred to mittens so that you have use of your fingers.

WARM/COOL WEATHER

It is advisable to wear layers of clothing since the air inside may be cool even if it is warm outdoors. Shirts under sweatshirts under jackets are ideal, as you'll be able to remove clothing if it gets warm or if we move outdoors where you'll be in the sun. Warm, waterproof boots or shoes are desirable.

HOT WEATHER

In spite of hot days, the air inside a barn or arena may feel cool (if we have the opportunity to work indoors). Layers of clothing are recommended – a tank shirt under a long sleeved blouse or shirt, for example. That way, you can remove clothing if you get warm and retain clothing if you are in a cool area. Waterproof shoes (**NO SANDALS!**), or OLD shoes are recommended. Leather as opposed to canvas shoes protect the foot better if the horse should step on you. Conditions may be muddy or dirty. Long pants (not shorts) are recommended.

Participant's Signature

Date

Signature of Parent/Guardian if Participant is a Minor

Date

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Office/Ranch Policy

Dear Clients and Families:

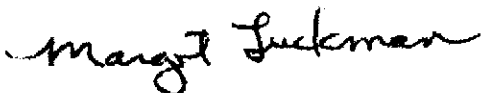
It is our pleasure to work with you, a member of your family or with your business associates. Office hours at Pearl Ranch, LLC are by appointment only. We try to be flexible to accommodate your work/school timetables. On the other hand, the equine program brings an increasing number of responsibilities that we must also attend to, and our ability to accommodate every family's work and school routine is limited at times. We do have certain times reserved for family or other outside responsibilities.

We included the equine program in 2013 to facilitate growth of the equine-assisted learning and therapy programs. We have found that our work in the pastures and the arena make casual clothing welcome and necessary. We also enjoy the relaxing environment and have a need to maintain our home environment in the midst.

Therefore, we ask that clients and families maintain scheduled times to visit us at the ranch. That way, we know that you are coming and are ready, willing and able to share time with you. Please check in with us at the office upon arrival before entering the rest of the land. If we have time to visit with the animals prior to a session or if you want to share something in particular with a family member, we will try to accommodate your request. I must ask that NO client, parent/family member or business associates enter the rest of our land, buildings, pasture or arena area without one of us. These restrictions are to ensure everyone's safety and must be strictly adhered to.

Having said that, we want you to know that Pearl Ranch is a warm, friendly environment; we hope that our policies won't dampen anyone's spirits. The work done here is fun and it easily generates excitement and love. We hope that you enjoy and have fun on our ranch and equine-assisted experiential learning/counseling program.

Best Regards,



**Margot Luckman, M.S., C.R.C., L.C.P.C., E.S., C.M./F.
Advanced EAGALA Certified**

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HORSE RELATED ACTIVITIES COME WITH THIS WARNING

SECTION A. Protective Attire

I am hereby advised to always wear hard-soled, fully enclosed shoes or boots and socks to protect feet and long pants to protect legs while working around or interacting with horses.

SECTION B. The Nature and Physical Character of the Horse

Domesticated, well-trained horses are usually obedient, docile and affectionate.

However, it is important to understand that their survival instincts are what have allowed the horse to survive from prehistoric times to the present day.

I am advised that horses are unpredictable by nature, with minds of their own, as are all animals both domestic and wild. The horse is often somewhat high strung or nervous by nature.

Horses are extremely strong and physically powerful.

Horses are extremely heavy weighing from 600 to 1300 pounds on the average.

These characteristics deserve a human being's utmost respect.

I am advised that when a horse is frightened, angry, under stress or feels threatened, it is the horse's instinct to jump forward or sideways, to run away from danger at a trot or gallop of speeds up to 35 miles per hour.

I am advised that if a horse is frightened or feels threatened from behind, the horse may kick straight back, sideways in either direction or even forward with either or both hind legs with tremendous force.

I am advised that if a horse is frightened or feels threatened from above or from his/her back, he/she may hunch the back and buck in a way that could throw a rider to the ground with tremendous force. A fall from a horse will usually be from a height of 3 to 6 feet.

I am advised that if a horse is frightened or feels threatened from the front, the natural reaction may be to rear up with both front legs, strike with one or both front legs, bite with teeth, throw the head up or from side to side, or run directly over whatever he/she fears in front of him/her.

I am advised that a human must always approach a horse calmly and quietly with caution, preferably to the horse's shoulder or lower neck, talking soothingly to the horse.

I am advised that loud and/or sudden unexpected movements, dropping of objects near a horse, approaching vehicles or animals or people, ill-fitting equipment or physical pain can provoke a domesticated horse to react according to natural, protective instincts.

I am advised that the first signs of anger or fear in a horse are the sudden tensing of the muscles of the body, possibly laying the ears flat back against the head, or quickly tossing or raising the head, or sudden snorting through the nostrils accompanying at least one other warning sign.

I am advised that a horse can see independently with each eye, actually looking in one direction with one eye and another direction with the other eye. The horse can also focus both eyes on one object somewhere in front of him/her. Typically the direction the ear is pointing will tell an observer where the eye is looking on the same side.

I am advised that a horse has two blind areas around which he/she cannot see. Those areas are directly behind the horse and directly in front. When a horse has his/her head lowered to the ground, the spot directly at the end of the nostrils is a blind area. This is the reason it is best to approach a horse close to the shoulder, and never to surprise a horse from the rear, or to reach first for the horse's mouth.

I am advised that while a horse is very sure-footed by nature, horses may accidentally step on an object such as a human's foot when the horse is balancing or turning around. When a horse is worked on unstable ground or slippery grass or footing, the horse could fall down injuring the horse, rider and /or handler.

Introduction to the Therapeutic and Learning Programs

Pearl Ranch, LLC, is an organization founded by Margot Luckman, M.S., C.R.C., L.C.P.C., E. S., C.M./F. with the intent to promote growth and learning by offering clients an alternative to traditional talk therapy, and group learning with horses, by providing Equine Assisted Psychotherapy and Equine Assisted Learning.

Values

At Pearl Ranch LLC, the values that are important to us include:

The safety of all participants, human and animal;
Respect for all;
The courage to try new things without judging the outcome;
Cooperation and negotiation with others;
Personal growth and learning;
Balancing consistency and flexibility; and
Responsibility.

We believe that through the process of building relationships with animals and the natural environment an individual can come to know themselves better. This process also allows individuals to develop and improve communication with others and to manage the expression of feelings with greater clarity.

Goals

It is important to us that we provide a safe environment in which to:

Discover and nurture strengths, interests and talents;
Support effort toward change;
Establish consistent and stable relationships;
Improve interpersonal skills;
Enhance self-worth and empowerment;
Identify and develop individual learning styles;

Gain knowledge, communication and coping skills through outdoor experiences, and Conduct Equine Assisted Psychotherapy (EAP) and Equine Assisted Learning (EAL).

Considerations

You will be introduced to safety aspects of being around animals during your initial sessions. Attention to safety issues by all involved will be a regular part of each session. If you are the parent/guardian of a program participant, your interest in the process and activities is important. Please notify the therapist/facilitator of any significant behavioral/emotional or physical changes, which may impact activities.

It is important for us to have an understanding of the participant's physical strengths and weaknesses. This information might include flexibility, hearing/sight impairments, endurance, balances, and allergies, skin sensitivities, cardiac problems, and dexterity. Please let us know of any problems, which arise during physical activities so that we may develop sessions accordingly.

We wish to keep participation in our program a productive experience for all. Physical contact between participants does occur. It is our expectation that everyone (staff and participants) will maintain appropriate physical and personal boundaries. Program participants should wear clothing suitable to being in a barn and animal oriented environment. We will assist you to meet this standard in any way we can. The therapist/facilitator will discuss the particulars of this with you prior to your first session. A session will not proceed if the participant's clothing is unsuitable.

Agreement:

I agree to be responsible for my physical, spiritual, mental and emotional safety, and in that way, add to the safety of all involved.

Participants Signature

Date

Signature of Parent/Guardian if participant is a minor

Date

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Authorization for Emergency Medical Treatment

Name: _____ Date of Birth: _____

Address: _____

Telephone Numbers: _____ home; _____ cell; _____ others

Medical Providers: Physician: _____

Others: _____

Health Insurance Company: _____

Policy Number and Information: _____

Current Medications:

<u>Treatment</u>	<u>Medication</u>	<u>Dose</u>	<u>Physician</u>

In the event of an emergency, contact the following parties:

Name: _____ Telephone: _____ Relationship: _____

Name: _____ Telephone: _____ Relationship: _____

Name: _____ Telephone: _____ Relationship: _____

In the event emergency medical treatment or assistance is required for an reason while on the property of Pearl Ranch, I authorize Pearl Ranch to: Secure and retain medical treatment and transportation if needed, and release client records upon request to the authorized medical providers or emergency medical providers providing 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.

Consent Signature: _____ Date: _____

Client, Parent or Legal Guardian

Legal Guardian or Parent of: _____

Non-Consent Plan

I do not give my consent for emergency medical treatment in the case of illness or injury while on the property of Pearl Ranch, LLC. In the event an emergency treatment is required, I wish the following procedures to take place: _____

Consent Signature: _____ Date: _____

Client, Parent or Legal Guardian

Legal Guardian or Parent of: _____

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Participant's Medical History & Physician's/Nurse's/or Guardian/Parent Statement

Participant Name: _____ DOB: _____

Address: _____

Name of Parent or Guardian: _____

Tetanus Shot: Yes / No Date: _____ Height: _____ Weight: _____

Current Medications: _____

Please indicate if client has a problem and/or surgeries in any of the following areas by checking yes or no. If yes, please comment, using back of form if necessary.

Areas	Yes	No	Comments
Auditory			
Visual			
Speech			
Cardiac			
Circulatory (inc. Hemophilia)			
Pulmonary			
Neurological			
Muscular			
Orthopedic (incl. Spinal/Joint Abnormalities)			
Allergies (incl. Asthma)			
Learning Disability			
Mental Impairment			
Psychological Impairment (incl. Behavioral)			
Diabetes (not restrictions if any)			
Other:			

Guardian/Parent OR PHYSICIAN/NURSE MUST SIGN BELOW FOR ALL CLIENTS

In my opinion this patient can participate in supervised equestrian activities.

Signature: _____ Date: _____

Complete Address: _____

OR

Client/Patient/Guardian Signature _____