

Camp Horse Country Application – Summer 2017

Web Address: www.camphorsecountry.com/www.horsecountryfarm.com Phone: (360) 691-7509 or (425) 335-4773

Yes, I am coming to Horse Country Day Camp for ___ 3-Day Intro Camp, ___ Wild West Camp I ___ Wild West Camp II

My name is _____ and I am _____ years old. I am going into _____ grade.

My birthday is ___/___/____. I weigh _____ lbs* & I am ___ ft ___ inches tall. I wear _____ size t-shirt. ___ Yes, I need to rent an equestrian helmet – Rental Cost; \$25.00 for 3 days & \$35.00 for 5 days. I am a returning ___ Wild West Camper I ___ Wild West Camper II ___ Yes, I have previous horseback riding experience. ___ No, this is my first horse experience. I came to Camp Horse Country in _____ and this is my _____ 2nd week, _____ 3rd week of horse camp. Yes, I need before/after camp care. I will arrive at _____ and leave at _____. *For the health of our horses, please respect our upper weight limit of 150 pounds.

I'm coming to Camp Horse Country for the Session or Sessions of:

[] June 26 [] July 10 [] July 17 5-Day Wild West Camp I [] July 24 [] July 31 3-Day Wild West Camp I

[] Aug 7 [] Aug 14 Wild West Camp II

CAMPS LIMITED TO THE FIRST 10 RIDERS EACH SESSION, SO SIGN UP EARLY!

Instructors GREET campers in the parking lot **from 8:45 – 9:00 AM, Tuesday – Friday. Please be on time & meet us there. FOR THEIR SAFETY, YOU MUST SIGN YOUR CHILD IN & OUT WITH THE INSTRUCTORS.** Instructors bring campers out for pick-up by parents in the parking lot at 3:45 – 4:00 PM (3–Day Intro Camp & Wild West Camp I & II) Monday-Thursday. Campers will leave with their parents after their Camp Horse Show on the last day of camp. Enclose a \$75.00 non-refundable deposit per camper, per session. Balance of fees due the first day of your child's camp session, including helmet rental and before/after camp care.

I UNDERSTAND HORSE COUNTRY DOES NOT OFFER THERAPEUTIC RIDING. HORSE COUNTRY CAMPS ARE NOT THERAPEUTIC PROGRAMS. HORSE COUNTRY RECOMMENDS THE "LITTLE BITS" RIDING PROGRAM FOR STUDENTS WITH SPECIAL NEEDS.

I AGREE TO ASSUME FULL LIABILITY FOR MY CHILD/CHILDREN IN CASE OF ACCIDENT/INJURY. I WILL NOT HOLD HORSE COUNTRY OWNERS/EMPLOYEES RESPONSIBLE IN CASE OF ACCIDENT/INJURY. I understand it's the nature of large animals such as horses/ponies to occasionally be unpredictable, especially when startled by other animals or circumstances not easily anticipated. There is an INHERENT RISK IN riding/attending any horse/pony which must be ASSUMED BY ME ON BEHALF OF MY CHILD/CHILDREN. Horseback riding is a PHYSICAL ACTIVITY, SO I WILL SEND MY CHILD/CHILDREN IN good health: e.g. NO broken bones, NO contagious diseases, and NO ALLERGIES TO HORSES. MY CHILD/CHILDREN WILL DRESS TO RIDE/ATTEND HORSES/PONIES, per the Instructor's Directions, **Long jeans, camp shirt, suitable foot-wear, please.**

PARENT'S NAME (printed): _____ PARENT'S SIGNATURE: _____

E-MAIL ADDRESS: _____ DATE SIGNED: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE:(____) _____ ALTERNATE PHONE:(____) _____ EMERGENCY PHONE:(____) _____

Mail to: **HORSE COUNTRY FARM**

AMT ENCLOSED: _____

P.O. Box 2, Granite Falls, WA 98252 E-Mail: ckennedy@horsecountryfarm.com

