

# Camp Horse Country Application – Summer 2018

Web Address: [www.camhorsecountry.com](http://www.camhorsecountry.com)/[www.horsecountryfarm.com](http://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, \_\_\_5-Day Wild West Camp \_\_\_ Advanced Wild West Camp. I am coming to Horse Country Day Camp for \_\_\_**HORSE CRAZY CAMP** for \_\_\_2 weeks, \_\_\_3 weeks, \_\_\_4 weeks, \_\_\_6 weeks \_\_\_**ALL SUMMER (8 WEEKS)**

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 \_\_\_ Advanced Wild West Camper \_\_\_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 \_\_\_\_\_2<sup>nd</sup> week, \_\_\_\_\_3<sup>rd</sup> 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:

[ ] April 2 [ ] June 18 [ ] June 25 [ ] July 9 [ ] July 30 5-Day Wild West Camp [ ] July 25 3-Day Intro Wild West Camp  
[ ] Aug 6 [ ] Aug 13 Advanced Wild West Camp

## **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** and bring campers out for pick-up by parents in the parking lot at 3:45 – 4:00 PM (**3-Day Intro Camp & Wild West Camps**) Monday-Thursday. **Parents must pick up Horse Crazy campers at the Horse Country Farm office each day at the end of camp.** 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. **FOR THEIR SAFETY, YOU MUST SIGN YOUR CHILD IN & OUT WITH THE INSTRUCTORS.** 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](mailto:ckennedy@horsecountryfarm.com)