



WALNUT HILL STABLES

4405 County Road 15, Marengo Ohio 43334

(330) 347-9206

www.walnuthillstables.com

2020 Horse Camp Registration Form

Camper's Name _____ Birth Date ____/____/____

Food Allergies _____ Other Allergies _____

Special Needs _____

Street Address _____

City _____ State _____ Zip Code _____

Telephone (____) ____ - _____ Cell Phone (____) ____ - _____

Email _____

Persons Authorized for Drop Off and Pick Up _____

Camp Dates

- **Horse Camp**- June 22-26 10am-3pm, beginner-intermediate ages 9 & up. \$350
- **Horse Show Boot Camp**- July 6-10 9am-3pm, intermediate-advanced riders. \$400
- **Beginner Horse Camp**- July 13-17 10am-2pm, beginner ages 4-8. \$300
- **Horse Industry Career Camp**- August 3-7 10am-4pm, ages 9 & up. \$425

Payment and Registration

Registration deposit is \$100. Please print out, complete and mail this 4 part registration; registration form, horseback riding questionnaire, liability release, and medical emergency information with deposit to : Walnut Hill Stables, 4405 County Road 15, Marengo, Ohio 43334 with cash, money order or checks made payable to "Walnut Hill Stables". Deposit is non refundable. The only circumstance which would result in refunds would be if the camp is cancelled due to lack of registration.

You will be contacted with confirmation of receipt of your deposit through email.

Balance Due \$_____ upon arrival at first day of camp.

How Did you hear about Camps at Walnut Hill Stables?

Walnut Hill Stables Summer Camp

Horseback Riding Questionnaire

Please fill out this questionnaire to help us prepare for your time at camp. This form is necessary so we can match horse and rider appropriately and therefore give campers a great time at camp. Thank you!

Camper's Name _____ D.O.B. _____

Height _____ Weight _____ *please note that horses have a 170 lb. weight limit*

Riding Experience (check one)

_____ Pre-Riding (never been on a horse, afraid of horses and/or may need support to sit balanced in saddle)

_____ Beginner (ridden a horse but not for a long time or still needing to build on basic skills, little to no experience)

_____ Intermediate (taken more than 5 horseback riding lessons and performs basic riding skills comfortable, also able to ride around other riders)

_____ Advanced (takes/has taken horseback riding lessons consistently, can walk/trot/canter and perform basic riding skills, confident and comfortable with riding/working with horses)

Please describe and riding experience you have or anything we should know about your riding.

Please note, all horses and ponies are assigned by the Camps Director at their discretion. We take into consideration the age/weight/experience of campers to ensure a safe and enjoyable time at camp.

Medical Emergency Information

Child's Name- _____

Date of Birth- _____

Guardian #1- _____

Contact Number- _____

Guardian #2- _____

Contact Number- _____

Alternative Emergency Contacts:

Name _____ Phone number _____ Relationship _____

Name _____ Phone number _____ Relationship _____

Allergies, special needs: _____

Permission & Consent

Emergency Transportation Consent

- In an emergency, I give parental consent for staff members to take my child to the nearest hospital or medical clinic to receive the necessary medical attention, if unable to contact either parent or for immediate emergencies.

First Aid Consent

- While under the care and supervision of Walnut Hill Stables staff, I give consent for the Walnut Hill Stables staff to administer First Aid to my child as needed.

Paramedic Consent

- In case of an emergency, when parents cannot be reached and all means of reaching them have been tried, I give my permission to the Walnut Hill Stables staff to call the paramedics squad to transport my child to the nearest hospital.

Sunscreen

- I give consent for staff at Walnut Hill Stables to apply sunscreen to my child. I will send sunscreen with my child throughout the duration of camp.

I have read and fully understand the important information listed on this form, warning risk, assumption of risk and waiver and release of all claims. If registering a minor participant, I further attest that I have read this form to my minor child/ward.

Signature

Print Name

Date

AN AGREEMENT AND RELEASE FROM LIABILITY CONTRACT

PLEASE READ THIS DOCUMENT CAREFULLY

This AGREEMENT AND RELEASE FROM LIABILITY is entered into on this _____ day of _____, in the year 20____, by and between Keri Myers, Rick and Becky Grissinger and Walnut Hill Stables (OWNER) and (RIDER), and, if Rider is a minor, the parent/guardian of Rider _____. In exchange for use of property, facilities, and services of Owner, the Rider, his/her heirs, assigns and legal representatives, hereby expressly agree to the following:

1. I agree horseback riding and all equine activities are inherently dangerous activities **AND** that these activities will expose me to above normal risks of bodily injury and/or death.
2. I agree that I am responsible for my own safety while engaging in any and all equine activities o Owner's property and/or the adjoining property of others, which have given me permission to ride.
3. I agree to acknowledge all of owner's rules and regulations pertaining to any and all equine activities occurring on Owner's property and I agree to and am responsible for wearing protective gear appropriate for equine activities to ensure Rider's safety while engaging in such activities.
4. I understand the risks involved in equine activities and **I AGREE TO ASSUME ANY AND ALL RISKS INVOLVED IN RIDER'S USE OF OR PRESENCE UPON OWNER'S PROPERTY AND FACILITIES** while engaging in any equine activity without limitation and including the risks of death, bodily injury, property damage, falls, kicks, bites, unavailability of emergency medical care, and/or the ordinary negligence and/or deliberate act of another person.
5. I agree that Owner, the Owner's stable, it agents, and employees are **NOT** liable for any injury to or the death of Rider and/or a participant in equine activities resulting from the inherent risks of equine activities resulting from the inherent risks of equine activities.
6. I agree to hold Owner, Owner's stable, its agents, and employees completely harmless and not liable and release them from all liability whatsoever, including acts of ordinary negligence, associated with any equine activity during Rider's use of or presence upon Owner's property or the adjoining property of others for which permission to ride has been granted.
7. I agree to hold the owner of any and all adjoining property for which permission to ride has been granted completely harmless and not liable and release them from all liability whatsoever, including acts of ordinary negligence, associated with any equine activity during Rider's use of or presence upon the property owner's property.
8. **I AGREE NOT TO SUE** Owner, Owner's stable, its agents and/or employees in association with **ANY** claims, damages, costs, or expenses arising out of Rider's use of or presence upon Owner's property and facilities while engaging in and all equine activities including those based on death, bodily injury, and property damage, unless the damages are caused by the direct, willful and wanton gross negligence of the Owner.
9. Rider is responsible for complete and full insurance coverage on himself/herself, [personal property, and Rider's horse.
10. Rider and Rider's parent or guardian, (if Rider is a minor) agree that this agreement and release of liability is a contract that when signed by the parties involved will be legally binding to all parties, subject to the above terms and conditions and shall be enforced and interpreted under the laws of the state of Ohio.

******* I have read and understand without question, this agreement and release of liability contract before having signed below.**

X _____
Staff Signature

Rider's Name

Parent or Guardian Name

X _____
Rider's Parent or Guardian's Signature (if Rider is a minor)