

www.foothillsfarm.on.ca

2010 RIDING CAMP REGISTRATION FORM

Name of Camper: _____ Age: ____ Sex: ____

Address _____ City _____

Province _____ Postal Code _____

Health Card No: _____

Any special health or other care or help required: _____

Camp week requested:

July 4-9 _____ July 11-16 _____ July 18-23 (Show Camp) _____ July 25-30 _____

Camp: Overnight _____ Day _____ Will bring own horse: Yes _____ No _____

Riding experience (e.g., Beginner, Novice, Advanced): _____

Name and Address of Parent or Guardian responsible:

Street Address _____

City _____

Province _____ Post Code _____

Telephone _____ Business Phone _____

Please print name(s) of any other camper(s) you wish to have in the same camp week.

Summer Camp rate is \$600.00 (plus \$78.00 HST) for the camp week which includes the use of a school horse. If you are bringing your own horse, please add \$100.00 plus HST (\$113.00 boarding fee) to the camp rate for a total of \$791.00.

Rate for day campers \$425.00 (plus \$55.25 HST), the rate for Day campers with horse will be \$525.00 (plus \$68.25 HST).

Day camp starts at 8:30 a.m. to 5:30 p.m. Monday to Thursday, all day and overnight campers to be picked up Friday after lunch.

A \$50.00 deposit is required with registration for each camper, refundable if registration is cancelled ten or more days before the first day of camp week booked.

Please sign the waiver included with this form.

Please sign and send attached to the camp form

Agreement for Acceptance of risk and waiver of liability for a minor child

I request permission for my child,

Child's name: _____

to participate in horseback riding and other activities at:

Location: _____

I fully understand that horseback riding, handling and grooming of horses and other stable activities are very dangerous. I wish to allow my child to participate in these activities knowing that they are dangerous.

I accept and assume all the risks of injury (including death) to my child or my property. I represent and warrant that I have the authority to give this release.

In exchange for my child being permitted to participate in these activities, for my child, myself, my child's heirs, guardians, and legal representatives, I release and agree not to make or bring any claim of any kind against: _____
for any injury (including death), to my child or any damage to my property, arising out of my child's participation in these dangerous horseback riding or related activities.

Dated: _____

Signature: _____

Print name: _____

Child's name: _____