

### Mountain Trail Summer Camp July 23 – 27, 2018

July 23 - 27, 2018 9:00 AM - 3:00 PM Ages 6 - 13 yrs

### **CAMP REGISTRATION INSTRUCTIONS:**

- 1. Complete this form online (it really helps us to not have to read hand-written forms)
- 2. Save it using your child's/camper's name
- 3. Email us the completed form. Email to <u>Linda@WildHorseMountainFarms.com</u>
- 4. We will email you confirming that you have a camp reservation. When you receive that confirmation, please go to <a href="https://www.wildhorsemountainfarms.com/2018-summer-camp">https://www.wildhorsemountainfarms.com/2018-summer-camp</a> and PAY in full using PayPal or a credit card.
- 5. Print out the completed form, sign all signature lines, and bring it to the first day of camp (REQUIRED)

Camper Information			
Full name: First:	Last:		
Street address:	City: State: Zip:		
Age: Date of birth: _	Height: Weight:		
Camper t-shirt size: check	one: Youth Adult		
check	one:XSSMLXL		
Parent / Guardian Information			
Parent #1 Name: First:	Last:		
Phone:	Email:		
Parent #2 Name: First:	Last:		
Phone:	Email:		
	Camper Experience		
Has the camper been arou	nd horses before? Yes No		
Ridden a horse? Yes No At what level?			
	Camper Requirements		
	Every camper needs to bring a sack lunch and drink. Note: Wild Horse Mountain		
	Farms will provide snack, drink and art/craft supplies.		
Camp Supply List	Bring sunscreen  Prior a potent position had believed.		
	<ul> <li>Bring a safety certified helmet</li> <li>Bring heeled boots</li> </ul>		
	Please wear long pants, jeans or riding pants		
Camp Attire	No flip-flops or open toe shoes		
	Cost		
	Cost		
<b>\$350 for 5 day camp</b> (9:00 website via Paypal or credi	O AM to 3:00 PM) due in full upon WHMF confirmation of camp registration; payable on our transfer transfer of the transfer of		
After care is \$15 per hour	r per day per child. Does this camper need before/after care? Yes No		
If yes Arrival time:	Pick-up time:		
Farliest arrival is 8:00 AM &	latest nick-un is 6:00 PM		



# Medical Release & Waiver

Name of camper:	Age:
Parent or Legal Guardian:	Phone:
Does the camper have ANY allergies (animal hair, dust, hay), sensitivities,	medications or special needs? No
Yes – please explain:	
-	
Does the camper have any food allergies? Please fully explain and specify	emergency treatment? No
Yes – please explain:	
Tell us of any physical or emotional issues that the camper has that would your camper's experience? No	
Yes – please explain:	
Hospital Preference:	
Check here: I state that while I am / my child is participating in st	ummer camp that I am appropriately
covered by medical insurance.	
Insurance information (name/policy and group #):	
Doctor:	Phone:
Emergency contact:	Phone:
I/we, the undersigned, allow Wild Horse Mountain Farms INC or its representat medical facility. I/we also agree to be financially responsible for all treatment au INC, or its representatives. I/ we further agree that a clear photocopy of this for original.  HOLD HARMLESS I understand that the caring for and riding of horses are inherently dangerous a around horses will include mishaps such as falling off which may result in injury	thorized by the Wild Horse Mountain Farms m shall serve the same purpose as the ctivities. I understand that riding and working
harmless Wild Horse Mountain Farms INC, its assignees and employees from a incidental cost and expenses, for injury to or death of any person or persons, or including any horse, arising from or in any way connected with my participation INC, and the performance of services or the teaching provided by Wild Horse N Both parents/guardians must sign below:	and against all claims and liabilities including r for loss or damage to any property, in the activities Wild Horse Mountain Farms
Signature:	Date:
Signature:(Signature of Parent or Legal Guardian for youth camper)	<del></del>
Signature:	Date:
Signature:  (Signature of Parent or Legal Guardian for youth camper)	



# **Liability Waiver & Release Agreement**

Name of camper:	Camp date:
Parent or Legal Guardian:	Phone:
RELEASE OF PHOTOGRAPHIC AND VIDEO IMAGE I hereby give permission to Wild Horse Mountain Farms INC and the permission to use, publish and republish any photographic or vide promotional and marketing purposes of the Wild Horse Mountain Fin connection therewith and relinquish any right to review or restriction below:	eo images of me and/or my child and/ or my horse for arms INC. I also permit the use of any printed material
Signature:  (Signature of Parent or Legal Guardian for youth camper)	Date:
Signature: (Signature of Parent or Legal Guardian for youth camper)	Date:
FOR ALL CAMP ATTENDEES  I hereby apply for permission to ride horses and/or engage in equestarms INC ("WHMF"). As a condition of such permission, I hereby  1. I am aware that horseback riding is a dangerous activity  2. I understand that horses are unpredictable and potentiall  3. I agree to assume all risk associated with horseback riding release WHMF from any liability for injury to me, my hors  4. I understand that I must wear a safety certified helmet at riding a horse or dismounting a horse.  5. I agree to pay any losses incurred by and to indemnify W caused by me while horseback riding or performing other  6. I am / am not (circle one) at least 18 years of age.  I AGREE TO THE PROVISIONS ABOVE AND HAVE READ AND FOLLOWING GENERAL TERMS AND CONDITIONS PROVIDED	represent and agree to WHMF as follows: that could result in serious injury or death. y dangerous. ng or other equine activities and will absolve and e, or my property. all times when around a horse, mounting a horse, HMF for damage to the person or property of others requine activities while at WHMF.
	Date:
IF THE PARTICIPANT IS A MINOR, A PARENT, GUARDIAN OR the parent or legal guardian of the person named above ("Campe agreement, including the General Terms and Conditions printed of Camper to ride horses on WHMF property, I agree on behalf of C comply with the terms of this agreement or claims not to be bound status or otherwise, I understand that Camper and I may be asked release, indemnify and hold harmless WHMF, their members, instansigns from any and all liability or losses resulting from any suit a resulting from a breach of this agreement.	r"). I have read and understand all of the terms of this on the last page of this form. To induce WHMF to allow amper to be bound by these terms. If Camper fails to d by the terms of this agreement by reason of minority d to leave the WHMF property and I further agree to tructors, employees, agents, attorneys, successors or
I AGREE TO THE PROVISIONS ABOVE AND HAVE READ AND FOLLOWING GENERAL TERMS AND CONDITIONS PROVIDED Both parents/guardians must sign below:  Signature:	D.
Signature: (Signature of Parent or Legal Guardian for youth camper)	
Signature:	Date:



#### **GENERAL TERMS AND CONDITIONS**

The following general terms and conditions apply to the activities described on this form:

- 1. **Exercise of Care. I** promise to exercise the highest standard of care in being watchful and alert for potential dangers to myself, the horse and equipment, other persons, and the property of others, so that no injuries or losses shall occur. I also promise to exert every effort to control the horse which I may be riding or which I rented, as well as other horses in my presence so that no bodily injury or property damage is inflicted upon others.
- 2. **Head Gear.** I acknowledge that the WHMF has advised me that while mounting, riding, dismounting and otherwise being around horses, I should wear a safety certified. I understand that the wearing of such head gear while mounting, riding, dismounting and otherwise being around horses may prevent or reduce the severity of some of the wearer's head injuries and possibly prevent the wearer's death as a result of a fall or other occurrences. If I am under the age of 18 or engaged in jumping of any kind, I agree to wear such headgear at all times while riding or being around horses on WHMF property.
- 3. **Natural Conditions.** I am aware that weather conditions, water, wild and domestic animals, insects, reptiles, or objects which may walk, run or fly near, or bite or sting a horse, and the existence of potential hazards in the natural terrain or man-made objects may scare a horse, cause it to fall, or cause it to react in an unsafe and unpredictable manner. I hereby assume all risk of injury to myself or my property as a result of such actions by the horse regardless of the cause.
- 4. **Safety Precautions**. I agree to observe all necessary safety precautions while mounting, riding, dismounting or being around horses including, but not limited to, common sense and rules posted on the premises of WHMF. Without limiting the foregoing, such precautions include not carrying loose items which may fall, blow away, flap in the wind, bounce or make sharp noises and making sure that items such as saddle girths, which may loosen during a ride, are appropriately tightened at all times. I will obey all WHMF rules.
- 5. **Understanding of Risks.** I am aware that horseback riding, whether it be on the trail or in the arena, as well as all associated activities, constitutes a calculated risk to the participants and that such activities involve inherent risks and dangers, including serious injury or death. I have sufficient experience with horses to understand the unpredictability and potentially dangerous character of horses generally and I understand that the use, handling, or riding of a horse always involves a risk of bodily injury to anyone who handles or rides horses as well as the risk of damaging the property of others. I understand that any horse irrespective of its training and usual past behavior and characteristics, whether characterized as gentle or otherwise, may act or react unpredictably at times based upon instinct or fright. I agree to assume the risk inherent in these activities.
- 6. State of Oregon Disclosure and Release of Liability. I understand that it is the policy of the State of Oregon that no person shall be liable for damages sustained by another person solely as a result of risks inherent in equine activity, insofar as those risks are, or should be, reasonably obvious, expected or necessary to the person injured. In furtherance of this policy and as a condition of my participation in equine activities at WHMF, including riding horses, I agree to waive the right to bring any action against the WHMF or its employees, or against any equine activity sponsor, for any injury or death arising out of riding, training, grooming, riding, as a passenger upon the horse or equine. I release WHMF, its agents, volunteers, employees, contractors, successors or assigns, from any and all liability, claims, demands, causes of action whatsoever arising out of any damages, both in law and in equity, in any way resulting from personal injuries, conscious suffering, death, or property damage sustained by me or by others arising out of horseback riding by me while taking instruction, being escorted on trail rides, while using WHMF facilities, or while grooming, caring for or exercising horses, or while participating in any of the activities conducted by WHMF, or during the transportation of horses and/or students.
- 7. Indemnity. I promise to exert every effort to control the horse which I may be riding or which I may have rented, as well as any other horses in my presence, so that no bodily injury or property damage is inflicted upon others. I hereby agree for myself, my heirs, personal representatives and assigns to indemnify and hold harmless WHMF and their members, owners, agents, employees, contractors, successors or assigns, lessors and joint ventures from any and all losses, claims, demands, actions, or proceedings of any kind which may be initiated against any of the foregoing by any person and arising out of any action or inaction on my part or on the part of WHMF or its owners, agents, volunteers, employees, successors or assigns and in any way related to any of the activities described in the preceding paragraph or contemplated under this Agreement.
- 8. Continuation of Terms. I agree and acknowledge that the terms and conditions of this Agreement, including my assumption of risk (paragraph 5), release of liability (paragraph 6), and indemnity (paragraph 7) shall continue in full force and effect at all times during which I am a Participant or leasing a horse at the WHMF, shall continue in full force and effect for the benefit of WHMF and their agents, volunteers, employees, contractors, successors or assigns, lessors and joint ventures at all times after the termination of the activities contemplated by this Agreement and shall be binding upon my heirs, personal representatives and the assigns of me or my estate.
- 9. **Disputes.** This Agreement shall be interpreted in accordance with the laws of the state and county where WHMF is located. Any dispute shall be litigated in the county in which WHMF is located.