

OLNEY FARM SUMMER CAMPS 2017

Name _____ age _____

Parent name _____

Address _____

City _____, Zip _____ email: PLEASE PRINT!

Tel: _____ Emergency Tel: _____

Are you in the Olney Farm Riding program now? _____)

Instructor: _____

Other Riding experience: _____

*ALLERGIES _____

Camp hours are 9am -3pm daily

Required:

- ASTM approved riding helmet, shoes or boot with a heel.
- Signed release of liability.
- \$100 deposit with application for each application

T shirt size (circle) youth S , M(8-10) L , Adult S, M, L, XL

Registration begins March 1st for current Olney Students and opens up to all on March 15th.

Current students have priority if over subscribed.

CAMP DATES: Check camp (s) you wish to attend. **Limited to 24.**

____ Farm Camp June 19-June 23

____ Intro Rider Camp June 28-June 30 \$175 (early) \$200 (after April 1)

____ Horsemanship Camp 1 July 10-14 Horse Show Friday

____ Horsemanship Camp 2 Aug 7-11 Friday Event with XC

CAMP COSTS

March - \$325

April - \$350

May through the start of camp - \$375

If you have multiple children in one camp there will be a \$25 discount for each additional sibling.

Total fee: \$ _____

Deposit: **required with application** - \$ 100

Balance (due 2 week prior) \$ _____

Before and After care \$25 X _____ days = M T W TH F	\$ _____
Before care \$15 X _____ days = M T W TH F	\$ _____
After care \$15 X _____ days = M T W TH F	\$ _____
7:30-5 pm(+ \$15 per $\frac{1}{2}$ hr additional).	Total due: \$ _____

Separate check for daycare to Kate Perri 410-877-8224: email

RELEASE OF LIABILITY

ALL STUDENTS: (Riders taking lessons or clinics at Olney Farm) ADULT **OR** JUNIOR ARE REQUIRED TO WEAR A USEF/USPC ASTM SEI **APPROVED** SAFETY HELMET WHEN MOUNTED. **ALL JUNIORS AND GUEST RIDERS ARE REQUIRED** TO WEAR THE APPROVED HELMET **WHENEVER** MOUNTED. IT IS THE FARM POLICY THAT NO ONE, ADULT OR JUNIOR, JUMP A FENCE WITHOUT AN APPROVED HELMET.

Release of liability:

I REALIZE THAT RIDING IS A HIGH RISK SPORT AND BY PARTICIPATING I EXPRESSLY ASSUME ANY AND ALL RISKS OF INJURY OR LOSS TO MYSELF OR THE HORSE THAT I AM RIDING. I REALIZE THAT HORSES CAN BE DANGEROUS AND UNPREDICTABLE AND AM WILLING TO ACCEPT THAT RISK. I AGREE TO HOLD HARMLESS OLNEY FARM, ITS OWNERS AND EMPLOYEES, THE INSTRUCTORS, PROPERTY OWNERS, AND/ OR MANAGERS OF ANY INSTRUCTION OR COMPETITION I MAY TAKE PART IN ON THIS FARM, FOR ANY INJURY OR LOSS SUFFERED; WHETHER OR NOT SUCH INJURY OR LOSS RESULTED, DIRECTLY OR INDIRECTLY, FROM THE NEGLIGENT ACTS OR OMISSIONS OF THE SAID OWNERS, INSTRUCTORS, EMPLOYEES OR MANAGERS.

Signed _____ Date _____

_____ (Parent or guardian if rider is under 18)

Print rider name _____ Tel. _____

No _____

Instructor

witness _____