

Windy Acres Horsemanship Lessons 2017 Registration Form

STUDENT NAME: _____

BIRTH DATE (mm/dd/yyyy): _____ GENDER: (M/F) _____

STREET _____ CITY _____
PROVINCE _____ POSTAL CODE _____

PHONE# _____ EMAIL _____

Parent/Guardian Information

NAME: _____

RELATIONSHIP TO STUDENT: _____

PHONE NUMBER: (____) ____ - ____ Daytime or Evening

CELL: (____) ____ - ____

Class Outline

- Theory sessions on care, management and safe handling of horses
- Safety Comes First – Equi Health Canada certified course
- Horsemanship lessons

Equipment Required

- SEI approved Riding Helmet
- Western or English Riding Boots (flat sole, ¼” heel)
- Jeans or riding breeches

8 week Junior Riding Program (3+ students per group ages 8-14, if classes do not fill pricing will be adjusted according to semi or private lessons or on waiting list)

July 4 – Aug 29, Tuesday 6-8pm

- \$580.00/per person

Kids Camp July 10-12 or Aug 14-16, Ages 8-14 (9am-3pm)

- \$300/per person

Prices include membership fee, HCBC individual insurance for youth and Safety comes first course

Semi Private

July 5 – Aug 30, Wednesday (Time TBC)

- \$750.00/per person

Price include membership fee, HCBC individual insurance for Adult and Fundamentals of Equine First Aid

Private

July 4 – Aug 29 or July 5 – Aug 30, Tuesday or Wednesday (Time TBC)

- \$880.00

Price include membership fee, HCBC individual insurance for Adult and Fundamentals of Equine First Aid

Lead line ride

Ages 4+ - ½ hr

- \$15/per person

Costs: Payments are due in full by June 8 to assure you retain your place in the lesson. Windy Acres Horsemanship Lessons reserves the right to add students to, cancel or combine lessons. Sign up prior to May 30 and receive a \$50 discount.

AGREEMENTS AND DISCLAIMERS

AGREEMENT: In signing this agreement for my child, I certify that he/she is able to participate fully in the program unless otherwise stated in writing to Windy Acres Horsemanship Lessons. I understand that I may withdraw from any programs with no penalty until the session due date. After the due date I will forfeit all costs unless placement is filled from waiting list.

I understand and agree to the policies and tuition obligations stated. I give Windy Acres Horsemanship Lessons permission to use any photographs or video displays of my child for promotional purpose or other legitimate reason.

PARENT OR GUARDIAN SIGNATURE:

REGULATIONS: The directors reserve the right to ask any person who is disruptive in any way not to return. Due to the variety of activities and open areas, for the safety of your child, it is essential that he/she can follow directions. There will be no refunds for persons asked not to return.

INFORMED CONSENT AND RELEASE OF LIABILITY. In consideration of the participant, _____ being allowed to participate in the programs conducted by Windy Acres Horsemanship Lessons and to engage in all activities related to the programs, including but not limited to those listed in any advertisement, I, the undersigned, on behalf of myself and the above-named participant, do hereby waive, release and forever discharge, and indemnify and hold harmless, Windy Acres Horsemanship Lessons and its officers, agents, employees, and representatives from any and all claims, suits, actions, damages, losses, liability, costs and expenses (including attorneys fees and court costs), of any kind or nature whatsoever, incurred for injuries and/or damages to person and/or property, including those caused by the negligent act or omission of any of the foregoing persons or entities, arising out of, resulting from or in connection with participation by the above-named participant in the program.

(PLEASE INITIAL) _____

I understand that participation in these programs is potentially hazardous and can result in serious injury, and I am voluntarily allowing the above-named participant to participate in these programs with knowledge of the dangers involved. I hereby expressly assume and accept, on behalf of myself and the above-named participant, any and all risks of injury and death. By signing this I also assume liability for all spectators i.e. anyone, including myself, that I bring onto the property.

(PLEASE INITIAL) _____

I understand that participation in these programs may not be advisable for certain individuals, including but not limited to persons suffering from heart disease, diabetes, high blood pressure or low blood pressure and other conditions and illness, and persons taking medication. I hereby acknowledge that I have been advised to seek advice from a physician regarding the above-named participant's participation in these programs. I also acknowledge that it has been recommended that the above-named participant have regular physical examinations and consultations with his/her physician as to participation in these programs. I acknowledge that the above-named participant has either had a physical examination and has been given his/her physician's permission to participate, or that I have elected to allow the above-named participant to participate without the approval of his/her physician and I do hereby assume all responsibility for participation by the above-named participant in these programs.

(PLEASE INITIAL) _____

I certify that I have read and understand all of the foregoing and that, by signing this Informed Consent and Release of Liability, I intend to be bound legally and to bind the above-named participant, and our respective heirs, executors, administrations, successors and assigns.

Participant's Name: _____

Date: _____

PARENT/LEGAL GUARDIAN SIGNATURE:
