

# The Flying Heart Ranch

## Summer Horsemanship Day Camp 2017

Hello Cowpokes! We have a lot of fun activities planned for Summer Camps this year, and are looking forward to seeing you at the ranch. Bring your horse, or use one of our lesson horses! Call now to speak with us and reserve your child's spot!

We have a variety of camp sessions to choose from this year. Camps will run from 8:00 – 11:30 AM. Once your child's name is on the list, send your enrollment forms with a check to cover the full cost of camp to PO Box 1525, Penn Valley, CA. Your child's spot will be held for 5 days, allowing you time to get your payment and enrollment forms in. Your payment in full will secure your child's spot.

***Special Notes:** All campers must be 5 or older on the first day of camp. In order to be in the Intermediate/Advanced sessions, students should be comfortable with trotting and loping with other horses in the arena, and be able to control their horse well. Students in these sessions may have attended Summer Camps before, or may currently be receiving lessons, or may have shown their own horses. Students, and horses coming with students, need prior approval in order to enroll in an Intermediate/Advanced session.*

### Camp Sessions 2017

Session 1:

June 19 - 23 - \$325

Session 2:

June 26 - 30 - \$325

*Please send a full payment to the following address in order to reserve your spot:*

The Flying Heart Ranch  
PO Box 1525  
Penn Valley, CA 95946

## **Important Information**

- Bring a snack, water, a hat and sunscreen each day.
- Riding boots with a heel and jeans or riding pants must be worn by all participants. We have a selection of used boots that may be reserved in advance if needed, and can make suggestions on where to find good riding boots at a reasonable rate if you need to purchase some. Campers who are not wearing jeans and boots will not be allowed to ride that day.
- If you are bringing your own horse, you must also bring an ASTM/SEI certified Horseback Riding Helmet. If you are using a lesson horse, we have helmets for students to borrow. If you do not wish your child to share helmets with others, please purchase one for them. We have a list of vendors and products to meet these requirements.
- Cancellation Policy: We will not be able to give refunds on your tuition unless we are able to fill your spot from a waiting list. We will, however, try to fill a vacated spot at any point after registration if you are unable to attend your camp session.
- Boarding for the Camp: If you are bringing your own horse, you may choose to board your horse overnight given that you feed and clean up the paddock that your horse uses. You should also bring your own bucket for watering your horse. There is no extra charge for keeping your own horse overnight for the duration of the camp so long as you follow these directions. Please let us know if you will want a paddock in which to board your horse.

## Registration Form

(To be fully completed and turned in on the first day of camp)

Camper's Name: \_\_\_\_\_

DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Girl/Boy

Address: \_\_\_\_\_

Any previous horse riding/horse camp experience? Yes No

Level of riding: Beginning Intermediate Advanced

Daytime Phone: \_\_\_\_\_ Alternative/Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### **Emergency Contact Information**

#### Parent/Guardian Contact Information

Name: \_\_\_\_\_

Relationship to camper: \_\_\_\_\_

First Phone: \_\_\_\_\_

Alternate phone: \_\_\_\_\_

#### Alternate Contact

Name: \_\_\_\_\_

Relationship to camper: \_\_\_\_\_

First Phone: \_\_\_\_\_

Alternate phone: \_\_\_\_\_

#### Alternate Contact

Name: \_\_\_\_\_

Relationship to camper: \_\_\_\_\_

First Phone: \_\_\_\_\_

Alternate phone: \_\_\_\_\_

Any special health considerations? Does the rider have any physical or mental health conditions which may affect his/her safety and ability to ride a horse? Please also list any other health concerns or restrictions. (i.e.: allergic to bee stings, asthma, medications, drug allergies, etc. in case of emergency.)

\_\_\_\_\_  
\_\_\_\_\_

## **Permission to Use Photograph (Optional)**

Subject: Flying Heart Ranch Summer Horsemanship Camp for Kids

Location: 17170 Del Mar Way, Penn Valley, CA 95946

I grant to The Flying Heart Ranch, its representatives and employees the right to take photographs of me, my child, and my property in connection with the above-identified subject. I authorize The Flying Heart Ranch, its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that The Flying Heart Ranch may use such photographs of me or my child for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I have read and understand the above:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed name: \_\_\_\_\_

Signature, parent or guardian (if under age 18): \_\_\_\_\_

# Horsemanship Day Camp 2017

## Riding/Medical Release Agreement

Flying Heart Ranch  
PO Box 1525  
Penn Valley, CA 95946

PLEASE READ CAREFULLY BEFORE SIGNING

### A. Registration of Riders and Agreement Purpose:

In consideration of the applicable fee and the signing of this agreement, I, the following listed individual, or the parent or legal guardian thereof a minor, do hereby voluntarily request and agree to participate in riding instruction as a student of The Flying Heart Ranch, and that this student will either ride his/her own horse, or lesson horse provided by The Flying Heart Ranch for instructional purpose. I understand that I am responsible for the entire payment of my camp session in accordance with the guidelines set forth on the attached "Information & Registration Form".

### B. Agreement and Territory and Definitions:

This agreement shall be legally binding upon me the registered student, and the parents or legal guardian thereof if a minor, my heirs, estate, assigns, including all minor children, and personal representative; and it shall be interpreted according to the laws of the State of California and the county of Nevada. Any disputes by the rider shall be litigated in, and venue shall be Nevada County, California. If any clause, phrase or word is in conflict with state law, then that single part is null and void.

### C. Terms:

- i. "**HORSE**" herein shall refer to all equine species.
- ii. "**HORSEBACK RIDING**" herein shall refer to riding or otherwise handling of horses, ponies, or donkeys, whether from the ground or mounted.
- iii. "**STUDENT**" and/or "**RIDER**" shall herein refer to a person who rides a horse mounted or otherwise handles or comes near a horse from the ground.
- iv. "**I**", "**ME**", "**MY**" shall herein refer to the above registered student rider and the parents or legal guardians thereof if a minor.

### D. Activity Risk Classification:

**I UNDERSTAND THAT:** Horseback riding is classified as RUGGED ADVENTURE RECREATIONAL SPORT ACTIVITY and that there are numerous obvious and non-obvious inherent risks always present in such activity despite all safety precautions. The rider recognizes that equestrian activities are dangerous and have the potential for severe injury and/or death, and hereby release and agrees to indemnify and hold harmless The Flying Heart Ranch, and on behalf of its wards, charges, children, family, visitors, agents, individually and as guardian or personal representative covenants not to sue for special and general damages, by whomever sustained, resulting from property damage, injury, or loss of life (Claim) caused by the conditions on The Flying Heart Ranch or its owners' properties, the activities of the owners, its employees, guests, clients, and boarders and their families or guests, and the rider's horse, and further agrees to hold harmless and indemnify The Flying Heart Ranch and its owners against any such Claim whether presented by another, individually, or in a representative capacity, and further waives and releases subrogation claims of all medical, disability, property and liability and animal medical and mortality insurers, including, but not limited to damage resulting from medical and convalescent care, cost of support; and, as security for this hold harmless and indemnity rider grants and pledges a security interest in all money and proceeds arising from any such Claim including insurance proceeds, trust and guardianship remainders and proceeds from testate or interstate succession, which rider agrees not to relinquish or disclaim.

E. Nature of School Horses:

**I UNDERSTAND THAT:** The Flying Heart Ranch chooses its school horses for their calm disposition and sound basic training as is required for use for student riders, and The Flying Heart Ranch follows a rigid safety program. Yet, no riding horse is a completely safe horse. If a horse is frightened or provoked it may divert from its training and act according to its natural survival instincts which may include, but are not limited to: Stopping short, Changing directions or speed at will, Shifting its weight, Bucking, Rearing, Kicking, Biting, or Running from danger.

F. Conditions of Nature and Inspection of Premises:

**I UNDERSTAND THAT:** The Flying Heart Ranch is NOT responsible for total or partial acts, occurrences, or elements of nature that can scare a horse, cause it to fall, or react in some other unsafe way. Some examples are: Thunder, lightning, rain, wind, wild or domestic animals, insects, reptiles, which may walk, run, or fly near, or bite or sting a horse or person; and irregular footing on out of door groomed or wild land which is subject to constant change in condition according to weather, temperature, and natural and man-made changes in landscape. The rider or parent or legal guardian have inspected The Flying Heart Ranch facilities, and are satisfied that all premise conditions are reasonably safe for rider's intended purpose, usage, and presence upon The Flying Heart Ranch's premises.

G. Accident/Medical Insurance:

**I AGREE TO THAT:** Should emergency medical treatment be required, I and/or my own accident/medical insurance company shall pay for all such incurred expenses.

H. Protective Headgear Warning:

**I AGREE THAT:** I shall purchase and wear protective headgear (approved equestrian riding helmet) while around and mounted on the horses. I understand that the wearing of such headgear while mounting, riding, dismounting, and otherwise being around horses, may prevent or reduce severity of some head injuries, and may even prevent death from happening as the result of all or other occurrence, but cannot guarantee my safety or that of my child. For students bringing their own horses, The Flying Heart Ranch does not provide riding helmets for this use.

I. Liability Release:

**I AGREE THAT:** In consideration of The Flying Heart Ranch allowing my participation in this activity, under the terms set forth herein, I, the rider, and the parent or guardian thereof if a minor, do agree to hold harmless and release The Flying Heart Ranch, its owners, agents, employees, officers, members, students, premises owners, affiliated organizations and insurers from legal liability due to The Flying Heart Ranch's ordinary negligence; and I do further agree that except in the event of The Flying Heart Ranch's gross and willful negligence, I shall bring no claims, demands, actions and causes of actions, and/or litigation, against The Flying Heart Ranch and its associates as stated above in this clause, for any economic and non-economic losses due to bodily injury, death, property damage, sustained by me and/or my minor child or legal ward in relation to the premises and operations of The Flying Heart Ranch, to include while riding, handling, or otherwise being near horses owned by or in the care, custody and control of The Flying Heart Ranch.

**ALL RIDERS AND PARENTS OR LEGAL GUARDIANS MUST SIGN AFTER READING THIS ENTIRE DOCUMENT.**

**SIGNER STATEMENT OF AWARENESS**

I/We, the undersigned, have read and do understand the foregoing agreement, warnings, release and assumption of risk. I/We further attest that all facts relating to the applicant's physical condition, experience, and age are true and accurate.

Signature of Rider \_\_\_\_\_

Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_

Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**MEDICAL RELEASE AND INSURANCE INFORMATION**

IN CASE OF MEDICAL OR SURGICAL EMERGENCY, I HEREBY GIVE PERMISSION TO THE PHYSICIAN SELECTED BY THE CAMP DIRECTOR TO SECURE PROPER TREATMENT FOR, AND HOSPITALIZE IF NECESSARY, THE CAMPER LISTED ON THIS APPLICATION. EVERY EFFORT WILL BE MADE TO CONTACT THE PARENT OR GUARDIAN SHOULD SUCH AN EMERGENCY ARISE.

**ALL SUCH EXPENSES WILL BE THE RESPONSIBILITY OF AND SHALL BE PAID FOR BY THE PARENT(S) OR LEGAL GUARDIAN**

PLEASE PROVIDE THE FOLLOWING INFORMATION (PRINT OR TYPE):

FAMILY DOCTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

DO YOU HAVE HEALTH AND ACCIDENT INSURANCE? \_\_\_\_\_

NAME OF INSURANCE COMPANY: \_\_\_\_\_

PHONE NUMBERS: \_\_\_\_\_

AGENT (IF KNOWN): \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/STATE \_\_\_\_\_

POLICY OR GROUP NUMBER: \_\_\_\_\_

SIGNATURE OF PARENT OR LEGAL GUARDIAN: \_\_\_\_\_

**\*\*\*THIS FORM MUST ACCOMPANY THE REGISTRATION MATERIALS\*\*\***

**I AGREE TO THAT:** Should emergency medical treatment be required, I and/or my own accident/medical insurance company shall pay for all such incurred expenses.

PHONE NUMBERS: \_\_\_\_\_

AGENT (IF KNOWN): \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/STATE \_\_\_\_\_

POLICY OR GROUP NUMBER: \_\_\_\_\_

SIGNATURE OF PARENT OR LEGAL GUARDIAN: \_\_\_\_\_

**\*\*\*THIS FORM MUST ACCOMPANY THE REGISTRATION MATERIALS\*\*\***