**WOODLAND HORSE CENTER**
**16301 New Hampshire Avenue**
**Silver Spring, Md 20905**
**301-421-9156, fax: 301-421-9049**
**www.woodlandhorse.com**

**MINI CAMPS 2010**
**Please circle the date(s) which campers are attending**
**Monday, Jan 18; Monday, Jan 25; Monday, Feb 15**

**Cost is $65 per day; $10 per day for extended care**

Camper's Name_____ Birth date_____
Street _____
City _____ State _____ Zipcode_____
Phone _____
**Home** Work Cell
Email_____
(please print clearly; confirmations sent via email)
Drop-off time:_____ Pick-up time: _____
Person(s) authorized to pick up camper _____
Has the camper ridden before_____ Taken lessons (number of years) _____
Level of skill: please circle highest level walk trot canter jump
Does the camper have any physical and/or medical condition, problem, disorder which may affect his/her safety and/or ability to ride:

YES NO If YES, describe here _____

How did you hear about us? Newspaper, internet, friends, sign, yellow pages, other

In consideration of being permitted to use horses & equipment owned by, or in the case, custody & control of Woodland Horse Center (WHC), the undersigned "Licensee" & his/her family, estate, heirs or assigns hereby agrees to release & hold harmless WHC, its agents & employees from & against any claim, action, damage, loss of liability paid, suffered or incurred, whether or not foreseen or unforeseen, as a result of the use by the Licensee of such equipment & horses. Licensee hereby assumes liability & responsibility for any loss occurring to such equipment & horses & agrees to return such equipment & horses in the same condition as when received. Licensee has read & agrees to be bound by the rules & regulations affecting the use of such equipment & horses. The rules are announced by an authorized agent or employee of WHC. Licensee acknowledges he/she has been advised that horses are sometimes unpredictable & that there is a risk involved in riding & with such knowledge, Licensee hereby agrees to assume such risk. WHC does not carry medical insurance for its campers or customers.

**CAMPERS MAY BORROW A HELMET FROM WHC IF THEY DO HAVE NOT HAVE THEIR OWN**

**WHC has the right to refuse or terminate enrollment of any child who, in its sole discretion, presents a danger to himself, herself, other campers, staff, the horses or the facility.**

**I (WE) HAVE READ THE ABOVE RELEASE OF LIABILITY AND UNDERSTAND ITS PROVISIONS**

Guardian/Licensee's signature _____ Date_____
Printed name_____

Credit Card Nr _____ Expiration Date _____
Name on card_____
Deposit _____ Balance _____

Check Nr _____
Name on check_____
Deposit _____ Balance_____