

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

2010 PONY PAL SUMMER CAMP REGISTRATION FORM

Please circle week(s) which campers are attending. Each week \$375; extended care \$70; additional weeks \$350.

Week 1: June 21 - 25 Week 4: July 12 - 16 Week 7: August 2 - 6
Week 2: June 28 - July 2 Week 5: July 19 - 23 Week 8: August 9 - 13
Week 3: July 5 - 9 Week 6: July 26 - 30 Week 9: August 16 - 20 (½ day session - 9:00 - 12:00; cost \$250; extended care AM only is \$35)

Camper's Name _____ Birth date _____
Street _____
City _____ State _____ Zip code _____
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: circle highest level walk trot canter jump

Does camper have any physical/medical/ and/or 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 using horses & equipment owned by, or in the case, custody & control of Woodland Horse Center (WHC), the undersigned "Licensee" & 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, damages, whether or not foreseen or unforeseen, as a result of using such equipment & horses. Licensee hereby assumes liability & responsibility for any loss to such equipment & horses & agrees to return them in the same condition as received. Licensee has read & agrees to be bound by the rules & regulations affecting equipment/horse usage. An authorized agent or employee of WHC will announce such rules. Licensee acknowledges having been advised horses are sometimes unpredictable & 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 & customers.

ALL CAMPERS SHOULD HAVE THEIR OWN ASTM-APPROVED HELMETS; HOWEVER, IF THEY DO NOT HAVE ONE, THEY MAY BORROW A WHC HELMET.

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 _____

A DEPOSIT OF ONE-HALF OF THE TOTAL AMOUNT IS DUE AT TIME OF REGISTRATION; HOWEVER, PARENTS MAY PAY THE ENTIRE AMOUNT AT TIME OF REGISTRATION

DEPOSIT _____ **TOTAL AMOUNT** _____

Name on Credit Card _____
Credit Card Nr _____ exp date _____

Name on check _____ Check Nr _____

