

2018 Summer Horse Camp at Mack Hill Riding Academy

Session 1: June 18 – 22 9:00 am – 3:00 pm

Session 2: June 25 – 29 9:00 am – 3:00 pm

Session 3: July 30 – August 3 9:00 am – 3:00 pm

Session 4: August 13 – 17 9:00 am – 3:00 pm

A fun and educational experience for children of all skill levels ages 7 and up!

Activities to include: Riding lessons, games on horseback, basic horse care, hands on lectures, horse management skills and more! Other fun Summer-time activities planned such as: swimming, bathing horses, and arts and crafts.

Each camper should bring: long pants, boots with a low heel (hiking boots work great!), a packed lunch and snacks for break time (refrigerator is available in our camp room!), a refillable water bottle, bathing suit, towel, sandals or slides for walking to and from the pool, shorts or other comfortable weather appropriate clothes for after riding time.

Fees: \$500.00 per session. If a second child in the same family is enrolled, there is a 10% discount on that child's session fee (\$450.00). If a child is enrolled in more than one week of camp, there is a 10% discount (\$450.00) on subsequent weeks of camp. Discounts cannot be combined. A 50% deposit is needed per session to reserve each child's place at camp. The remaining balance is due on the first day of camp. Deposits are fully refundable until 30 days before the start of the camp session. Prearranged early drop off or late pick up is available at the rate of \$15 per 30 minutes, when prior arrangements are made and prepaid. Early drop off and late pick up without prior arrangements will be billed at \$15 for the first 5min – 15 minutes, and \$15 per 15 minutes late/early after that. One form per child enrolled.

If you would like to use a credit card for payment, please fill out the attached form. Your card information will be entered into our secure system and charged automatically for the deposit upon receipt and the balance due one week prior to the start of camp.

No refunds on cancellations within 30 days of camp.

Please return registration form, the release form and a 50% deposit to:

Mack Hill Riding Academy
3 Mack Hill Rd.
Amherst, NH 03031

Camper's Name: _____

Parent/Guardian: _____

Mailing Address: _____

City, State, Zip code: _____

Email: _____

Emergency Contact Name/Phone: _____

Please list any allergies or medical needs, or other accommodations you feel we need to know about in order to make your child's day at camp a success: _____

English or Western? _____

Skill level (Please circle one):

I have never had any formal riding lessons but may have ridden a few times

I've taken a few lessons before

I can walk and trot with the help of my instructor (lead line or lunge line)

I can walk and trot independently and know how to post the trot

I can walk and trot independently and have begun cantering on the lunge

I can walk trot and canter independently

Does the student jump? Yes No

I *DO* / *DO NOT* (please circle) give permission for photos of my child to me taken and used in Mack Hill promotional materials. Please initial: _____

Please circle the session(s) desired: Session I Session II Session III Session IV

(50% deposit required *per session*)

For Office Use Only

Amount Rec'd: _____ Payment Type: _____ Date: _____

Mack Hill Automatic Payments – Summer Camp

I, _____, **agree** to provide the following credit card information and authorize the credit card listed below to be automatically charged for my 50% deposit (\$250.00 per session or \$225.00 if eligible for the 10% discount) per camp session signed up for, upon receipt of this form, and the additional 50% due per session charged one week prior to the start of the camp session.

Credit Card Type: Visa MasterCard Discover American Express

Name On Credit Card: _____

Billing Address: _____

Zip Code: _____

Credit Card Number: _____

Exp. Date: _____

Security Code: _____

Email for Receipts: _____

Student: _____

- My child is signed up for, and my card should be charged for: (please check)**
 - 1 Camp Session - \$250 deposit / \$250 balance due
 - 2 Camp Sessions - \$475 deposit / 1 - \$250 balance due, 1 - \$225 balance due
 - 3 Camp Sessions - \$700 deposit / 1 - \$250 balance due, 2 - \$225 balances due
 - 4 Camp Sessions - \$925 deposit / 1 - \$250 balance due, 3 - \$225 balances due

Signature: _____ **Date:** _____

RELEASE FORM

SOUHEGAN RIDERS LLC
d/b/a Mack Hill Riding Academy
3 Mack Hill Rd.
Amherst, NH 03031

I, _____, agree to release for all purposes Souhegan Riders LLC, and its employees, agents, contractors and managing members (W. Scott O'Connell and Susan O'Connell), as well as the owners of 3 Mack Hill Rd., Amherst, New Hampshire (collectively, the "Equine Activity Sponsors") from any liability related to riding, training, grooming or other equestrian activities provided by Souhegan Riders LLC. I understand, acknowledge and affirm the limitations of liability provided by New Hampshire law (See RSA 508:19) for Equine Activity Sponsors. Each participant in an equine activity expressly assumes the risk of and legal responsibility for any injury, loss or damage to person or property which results from participation in an equine activity. Each participant shall have the sole responsibility for knowing the range of his or her ability to manage, care for, and control a particular equine or perform a particular equine activity, and it shall be the duty of each participant to act within the limits of the participant's own ability, to maintain reasonable control of the particular equine at all times while participating in an equine activity, to heed all posted warnings, and to refrain from acting in a manner which may cause or contribute to the injury of any person. In signing this release, I agree that I am aware of the risks and dangers involved with horseback riding and the related equine activities. I understand that horses/ponies are large and unpredictable animals by nature, that they may bite, buck, kick, rear and otherwise act in manner which could hurt me, that even the most experienced riders may have difficulties controlling an animal, and that the resulting risks can cause serious bodily injury or even death. Being aware of these risks associated with horses/ponies, horseback riding and all equestrian activities, I consent to and assume these risks. I also agree that in addition to the limitations of liabilities provided by state law, to hold the Equine Activity Sponsors harmless for any injury or damage I suffer while engaged in an Equine Activity.

Date

Signature of Participant (If over 18 years of age)

Signature of parent or legal guardian if the participant is under 18 years of age.

Date

Signature

/ Print Name

Street Address Town State Zip

Home Telephone Number and Cell Phone Number

E-mail address: _____