

# **2020 Horse Show Camp at** **Mack Hill Riding Academy**

August 4 - 7 (Tuesday - Friday)

Horse Show: August 9 at Oak Rise Horse Farm, Goffstown, NH

## **A four day intensive camp for students with some riding experience, culminating with attendance of an off-site horse show on August 9!**

Each student will be assigned a horse for the week which they will be responsible for caring for, practicing with, and preparing for the horse show. Students will learn all aspects of horse show planning and preparation from class selection and entry filing to clipping, wrapping, lunging and braiding, to trailer loading and tack and apparel selection.

Fees for this session of camp are **ALL INCLUSIVE**. For the cost of camp all horse show fees are covered, including: horse use, trailering, coaching, and class fees for the day of the show.

Because of the horse show aspect of this camp, each student will need prior to camp, horse show apparel appropriate for their age, division and discipline. Please inquire if you're unsure, or review the attached packing list.

Each camper should bring to camp each day: long pants, boots with a low heel to ride in, a packed lunch and snacks for break time (refrigerator is available in our camp room!), a refillable water bottle, a comfortable weather appropriate change of clothes for after riding time (optional), and a bathing suit for cooling off in the afternoon.

**Fees: \$650.00 per session.** 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 15 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 15 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, Zipcode: \_\_\_\_\_

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'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: \_\_\_\_\_

(50% deposit required *per session*)

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**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 (\$325) 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 Show Camp Session - \$325 deposit / \$325 balance 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: \_\_\_\_\_