



PONY KIDS® Horsemanship Day Camp 2011 Application

\$ _____ Registration Fee
\$ _____ Deposit for each week
\$ _____ Helmet Rental Fee
(if we are providing helmet use)

\$ _____ Total Enclosed

Woodsong Farm, LLC
121 Lund Farm Way, Brewster, MA 02631
Phone (508) 896-5800 • Fax (508) 896-8321
www.woodsongfarm.com

Name of Child: _____ Age: _____ DOB: _____

Mothers Name: _____ Father's Name: _____

Child's mailing Address: _____

Summer Residential Address: _____

Mother's Phone: Home # _____ Summer # _____ Other # _____

Father's Phone: Home # _____ Summer # _____ Other # _____

If rider is staying with someone other than a parent, please indicate below:

Name: _____ Relationship: _____

Address: _____ Phone: _____

Enrollment Dates: Please ✓time requested: (Rates are on our website, woodsongfarm.com)

Week	Begins	Ends	Time	Full Week	Monday, Wednesday, Friday	Tuesday & Thursday
1	June 27	July 1	9-12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			9-2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	July 4	July 8	9-12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			9-2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	July 11	July 15	9-12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			9-2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	July 18	July 22	9-12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			9-2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	July 25	July 29	9-12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			9-2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	August 1	August 5	9-12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			9-2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	August 8	August 12	9-12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			9-2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	August 15	August 19	9-12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			9-2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	August 22	August 26	9-12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			9-2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	August 29	September 2	9-12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			9-2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Requests for full weeks enrollment will be honored ahead of partial week requests.

The \$40 registration fee and a non-refundable deposit of \$100 per week is due with registrations received before May 1st. The balance is due in full by May 1st. If your selection is less than \$ (morning program), or you are registering after April 30th, full payment is due with the registration .

A late fee of \$10 per day registered will be charged for unpaid balances after May 1st.

No refunds will be given for withdrawal, absence, weather or dismissal after May 1st. Changes of weeks attending is permitted before May 1st at no charge, request for changes to weeks attending after May 1st will be charged \$50.00. All requests for changes are subject to approval.

On rainy days other activities may be substituted for riding. Make up riding is not scheduled for any reason. Unless we are notified in advance, campers must be present by 9:30 to be scheduled for that day's riding.

Each Child will need to provide a (completed) standard medical form listing immunizations prior to attending the camp program.

Name: _____ Age: _____ DOB: _____

Mailing Address: _____

List any physical or mental health problems: _____

List any allergies: _____

List any medications you child takes on a regular schedule: _____

In the event of an emergency I give Woodsong Farm permission to obtain the services of the rescue squad and/or other medical care and/or dental care in my child's behalf at my expense.

Emergency contact person (1): _____ *Not a Parent* Relationship: _____ Phone # _____

Emergency contact person (2): _____ *Not a Parent* Relationship: _____ Phone # _____

Phone numbers of parents: _____

Additional phone numbers: _____

Insurance ID #: _____ Company: _____

Local Doctor: _____ Phone #: _____

Local Dentist: _____ Phone #: _____

In the event of an emergency I give Woodsong Farm, LLC permission to obtain the services of the rescue squad and/or other medical care and/or dental care in my child's behalf at my expense.

I agree to be appropriately attired for all riding in properly fitted and maintained riding helmet with harness; riding boots or shoes with heels; and riding pants, chaps or long pants (not shorts). I am advised that failure to meet this dress code may be a safety hazard, and will be at my own risk. Instructors retain the right to not permit riding if not properly outfitted. Woodsong Farm has helmets available for temporary use, but makes no warranties as to their fit or safety. For health and safety reasons Woodsong Farm recommends riders purchase their own properly fitting helmet.

WARNING: Under Massachusetts law, an equine professional is not liable for an injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities, pursuant to section 2D of chapter 128 of the General Laws. I understand and agree that there is risk and potential danger of bodily injury and/or death in working with and/or riding horses/ponies. The size, strength, unpredictable nature, natural instincts, and behavior of horses/ponies allows for no guarantee of their reliability or safeness. Falls off the horse/pony, due to a rider's loss of balance or loss of control over the horse/pony, are common and should be anticipated as a part of riding at all levels of riding skill. Injury most commonly occurs in association with, but is not limited to, falls, being thrown from the horse/pony, dragged, bitten, kicked, stepped on, run away with, struck, pulled away from, or crushed by the horse/pony, falling with the horse/pony, and equipment failure or breakage.

I understand that Woodsong Farm, LLC regularly takes photographs and video tapes of our equine activity in which my child may appear. I give permission for the above to be used for books, photo albums, brochures, news letters, educational videos, press releases, student use and or advertising purposes.

Instructors or the directors reserve the right to withdraw any participant (a person taking part in any Woodsong Farm, LLC activity, or representing Woodsong Farm, LLC at an off premise activity) whose influence or actions are deemed harmful to themselves or others (including animals), or who will not follow the rules and policies of the program. If this occurs, no deduction or return of fee, or any part thereof, will be made. The use of illegal drugs, tobacco, alcohol, fighting, foul or abusive language, or animal abuse will not be tolerated and will be grounds for immediate withdrawal without any refunds.

My signature attests to my understanding and acceptance of any hazards associated with horses or ponies for me and/or my CHILD and releases Woodsong Farm, LLC, its employees, and its heirs, and assigns from any and all liabilities arising from activities and events at or associated with Woodsong Farm, LLC. I further understand Woodsong Farm, LLC does not carry any insurance for me and/or my child or in my child's behalf.

Any legal action brought against Woodsong Farm, LLC, its assigns, heirs and/or employees will be dependent on proving gross negligence on the part of Woodsong Farm, LLC, its assigns, heirs and/or employees and will be limited to the total sum of five hundred dollars, or if less, the medical expenses involved in an injury sustained in connection with Woodsong Farm, LLC. If gross negligence is not proved, all legal fees and court costs incurred by Woodsong Farm, LLC, and the cost of Woodsong Farm, LLC collecting said fees, will be at my expense.

I authorize the calling of a physician, the transporting of my child and/or the providing of other necessary medical services including emergency transportation at my expense. A qualified staff person may administer first-aid to my child. The emergency contact persons may be contacted to take my child from Woodsong Farm, LLC.

If any part of this agreement is found to be invalid that part does not void the remainder of the agreement.

Parent's or Guardian's Signature

Date