

Lessons • Therapeutic Riding • Boarding

## PFEC SUMMER PROGRAM

To reserve dates, you are requesting: please fill out this form, sign the <u>Release & Hold Harmless</u> <u>Agreement</u> (page #2}, include payment amount and return to Peck's Farm & Equestrian Center.

Print Child/Student Na	me:		
Age:	Height:	Weight:	
Parent/Guardian Name	:		
Address:			
Phone Number:			
IN CASE OF AN EME	RGENCY and we are una relationship to the student	ble to reach you, please	provide us with an
EMERGENCY CONTA	CT:		
Emergency Contact Phor	ne:		
Please Mark (X) wee	eks desired and all th	at applies (PFEC L	unch or CIT):
□ SUMMER SESS □ SUMMER SESS □ SUMMER SESS □ I am interested additional fees for this □ SUMMER SESS	SION 1 – June 21st to SION 2 – June 28th to SION 3 – July 12th to SION 4 – July 19th to in the Horse Show on shorse show) SION 5 – August 2nd to SION 6 – August 16th	July 2 <sup>nd</sup> July 16 <sup>th</sup> July 23 <sup>rd</sup> July 28 <sup>th</sup> & 29 <sup>th</sup> *(P	lease note that there are
A: One Session - 9:00 A  B: Two Weeks in a Roy	tes and either (A) One Ses AM - 1:00 PM: \$300.00 w - <b>Same Student</b> – Disco ion interfering? Do a partia *Typical age	ounted Rate of \$275 for values al week - day rate: \$75.0	week number two (2)



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PLEASE LIST ANY ALLERGIES, SPECIAL NEEDS, CONSIDERATIONS OR ANY OTHER
INFORMATION THAT YOU FEEL WE SHOULD BE AWARE OF:
TOTAL AMOUNT OWED TO PFEC: \$
ATTENTION PARENTS
The undersigned assumes the unavoidable risks inherent in all horse-related activities, including but not limited to, bodily injury and physical harm to horse, rider, and spectator.
In consideration, therefore, for the privilege of riding and/or working around horses at Peck's Farm and Equestrian Center, LLC., located at 16 Chowanec Road, Columbia, CT, the undersigned does hereby agree to hold harmless and indemnify Peck's Farm and Equestrian Center, LLC., its owners, representatives (whether actual or implied), operators, and property owners, and further release them from any and all liability or responsibility for accident, injury, damage, or illness to the child/student of the undersigned, the undersigned or any horse owned by the undersigned or to any family member or spectator accompanying the undersigned on the premises.
Parent/Guardian Signature
Please Print Name and Relationship to Child/Student
Date

**IMPORTANT**: Please read carefully. Do not sign unless you fully understand.

Please return both pages filled out via email to:

ride@pecksfarm.com

Please feel free to call (860) 771-0071 if you have any questions.