

EPONA LLC
11127 Orcas Ave, Lakeview Terrace 91342
818-568-2373

2021 SPRING CAMP REGISTRATION FORM

Please circle week(s) which campers are attending. Each week \$500; one day camp \$120

Week of camp:

Deposit of \$200 is due in order to hold Camper's spot for the week.

Dependent upon Availability: If interested in ONE day camp (we cannot guarantee one day camp as full week campers have priority), please specify the date(s) here:

Camper's Name _____ Boy ___ Girl ___

Birth date _____

Street _____ City _____
_____ State _____ Zip code _____

Phone _____ Home Work Cell _____
Email _____

Confirmation of enrollment will be sent by email.

Person(s) authorized to pick up camper _____

Has the camper ridden before _____ Taken lessons (number of years) _____ Circle
highest level of skill: walk trot canter jump

Does camper have any physical and/ or medical disorder which may affect safety and/or ability to ride: YES NO
If YES, describe here _____

How did you hear about us? Flyer, internet, friends, sign, facebook, other

The Undersigned has been advised that horses can be unpredictable & there is a risk of serious injury or death when grooming, handling or riding them. The Undersigned agrees to assume such risk when using Epona LLC, Riding Academy horses. Also, the Undersigned, along with family, estate, heirs or assigns agrees to release/hold harmless Epona LLC, Riding Academy, Jayme Huffines, its agents & employees, from & against any claim, action, damage, expense, loss or liability paid, suffered, or incurred, whether or not foreseen, as a result of using Epona LLC, Riding Academy's horses & equipment. In consideration of the above, the Undersigned agrees to abide by all rules & regulations which may be posted in the barn or announced by an Epona Academy agent or employee.

HELMETS WILL BE PROVIDED, HOWEVER IF CAMPER HAS A HELMET, PLEASE BRING.

Epona LLC, Riding Academy has the right to refuse or terminate enrollment of any child.

I HAVE READ THE ABOVE RELEASE OF LIABILITY & UNDERSTAND ITS PROVISIONS.

Guardian/Licensee signature _____

Date _____ Printed name _____

PLEASE HAVE PAPERWORK AND FULL BALANCE DUE ON THE FIRST DAY OF CAMP. SPOTS FILL FAST SO YOU WILL NEED TO CONFIRM THE WEEK YOU WANT YOUR CAMPER TO ATTEND BY PHONE OR EMAIL AS SOON AS POSSIBLE SO THAT WE CAN HOLD YOUR SPOT!!

RIDING APPAREL:

Camper will need to be dressed in jeans for riding with closed toe shoes, boots are preferred. If camper has riding clothes (breeches, jodphurs, boots, etc) that is also appropriate.

Please bring sunscreen, lunch and water!

Epona Riding Academy CAMPER'S HEALTH HISTORY

Child's Name _____

CONTACT INFORMATION:

Parent/Legal Guardian _____ Phone _____

Emergency Contact Person _____ Phone _____

Camper's Physician _____ Phone _____

HEALTH INFORMATION: Provide information on any medical, psychological or behavioral conditions, medications, dietary restrictions, allergies or special needs of which we need to be aware to ensure that your child's camp experience is positive.

List below:

If any prescriptions are to be administered, please list below:

Parent/Legal Guardian Signature _____ Date _____