

C & M FARMS EQUESTRIAN LLC

284 West Street Bolton, CT 06043

candmequestrian.com

SUMMER RIDING PROGRAM

| Open to all levels REGULAR CAMP WEEKS | ADVANCED WEEKS W/T/C Jump experience mandatory |
|--|---|
| June 23rd - 27th | June 30th - July 4th |
| July 7th - 11th | July 21st - 25th |
| July 14th - 18th | ***Advanced camp is open to riders who can walk trot and canter in an open field and have started jumping. Riders must be able to handle and tack up horses without assistance. |
| July 28th - August 1st | |
| August 4th - 8th | |

Children will need to wear tight fitting pants and boots with a heel. While mounted they must wear an ASTM approved helmet (helmets are available for riders without one). We encourage all kids to bring bottled water and a nutritious lunch.

9:00 AM to 1:00

What to expect:

1 Hour riding lesson
Tacking and untacking your own horse
Learning parts of the saddle and bridle
Learning parts of the horse
Proper horse grooming and bathing
Learning basic care of a horse
Horse related crafts
Fun games on and off horseback

Riding cost:

One session is \$375.00. A \$75.00 deposit with permission slip will be due to hold your spot. (balance is due the first day of program week you are attending). The deposit is non-refundable unless canceled 10 days prior to start date. Enrollment is on a first come first service basis. SIGN UP EARLY to save your spot. Additional weeks and multiple sibling discount is \$15.00 off.

www.candmequestrian.com

Sign up forms and more details can be found on our website

GIFT CERTIFICATES ARE AVAILABLE



2025

For more information, please call or text Mikayla @ 860-394-8220

C & M FARMS AND EQUESTRIAN CENTER LLC

284 West Street - Bolton, CT 06043

860-394-8220 or candmequestrian.com

Summer riding permission slip

Child name _____ nickname _____ age _____

Parent/Guardian name _____

Address _____ City _____ ST _____ Zip _____

Contact phone# (In order you would like to be contacted)

Name _____ Relation _____ # _____

Name _____ Relation _____ # _____

Physical limitations/restrictions: Riding is a moderately strenuous physical activity. Barn has hay and animal hair. Please note any limitations, allergies/asthma or attentional disorder which may effect your child's safety or enjoyment during this program _____

List any riding experience; _____

Session 1st choice _____ 2nd choice _____

Deposit paid _____ Balance due _____

Email for confirmation _____

ASSUMPTION OF RISK

In consideration of my child's participation in this summer horse program at C & M Farms, it is understood that I assume all risk in connection with any accident and or damage there to my child or property. I hereby release C & M Farms, its officers, employees and anyone associated with the organization of our program from any and all claims, demands and liability on account of any and all injuries, losses and damages to my child or my child's property that may occur during my child's participation in this program. The assumption of risk shall remain in effect until termination by written notice by me. By signing this form, I am stating I am parent or guardian of above child.

Print Name _____ Signature _____ Date _____

Medical Permission

I authorize C & M Farms to obtain medical attention for my child in the event of an emergency.

Signature _____ Date _____

Insurance carrier _____ Policy number _____

Please return this completed and signed with your deposit to reserve your space
_____ WEEK DATE _____