OLNEY FARM SUMMER CAMPS 2024

Name	eage	
Paren	nt name	
Addre	ess	
City_	, Zipemail:PLEASE PRIN	T'
	Emergency Tel:	
-	ou in the Olney Farm Riding program now?ctor:	
Other Requi	Riding experience:	
<u> </u>	ASTM approved riding helmet, shoes or boot with a heel. Signed release of liability. \$150 deposit with application for each camp PDATES: Check camp(s) you wish to attend. Limited!	
l	Farm Camp 1 - June 17-21 (9-3 daily with option half day at \$50 Farm Camp 2 - June 24-28)
	Horsemanship - July 15-19 Eventing Camp - Aug 5-9 Fri. Event with XC - must be able to WTC	& jump small course
Camp	hours 9-3 daily	•
Re Cu	_\$450 per week, Register after May 1 - \$475 egistration begins Feb. 1 for current students only and opens to all current students have priority if over subscribed. FIME Discount for sibling OR multiple camps -\$25 \$	on February 15.
<u>Depo</u>	sit -\$150 - check number #	\$
<u>Balan</u>	<u>nce</u>	\$
PLEA	ORE AND AFTER CARE AVAILABLE IF NEEDED - \$25 PER INSE CONTACT KATE AT 443-910-2759 MENT DUE AT THE TIME OF CARE	Tshirt size (please circle) Youth - S , M(8-10),

Adult - S, M, L, XL

RELEASE OF LIABILITY

ALL STUDENTS: (Riders taking lessons or clinics at Olney Farm) ADULT OR JUNIOR ARE REQUIRED TO WEAR A USEF/USPC ASTM SEI APPROVED SAFETY HELMET WHEN MOUNTED. ALL JUNORS AND GUEST RIDERS ARE REQUIRED TO WEAR THE APPROVED HELMET WHENEVER MOUNTED. IT IS THE FARM POLICY THAT NO ONE, ADULT OR JUNIOR, JUMP A FENCE WITHOUT AN APPROVED HELMET.

Release of liability:

I REALIZE THAT RIDING IS A HIGH RISK SPORT AND BY PARTICIPATING I EXPRESSLY ASSUME ANY AND ALL RISKS OF INJURY OR LOSS TO MYSELF OR THE HORSE THAT I AM RIDING. I REALIZE THAT HORSES CAN BE DANGEROUS AND UNPREDICTABLE AND AM WILLING TO ACCEPT THAT RISK. I AGREE TO HOLD HARMLESS OLNEY FARM, ITS OWNERS AND EMPLOYEES, THE INSTRUCTORS, PROPERTY OWNERS, AND/ OR MANAGERS OF ANY INSTRUCTION OR COMPETITION I MAY TAKE PART IN ON THIS FARM, FOR ANY INJURY OR LOSS SUFFERED; WHETHER OR NOT SUCH INJURY OR LOSS RESULTED, DIRECTLY OR INDIRECTLY, FROM THE NEGLIGENT ACTS OR OMISSIONS OF THE SAID OWNERS, INSTRUCTORS, EMPLOYEES OR MANAGERS.

Signed			
	or guardian if rider is under 18	3)	
Date			
Print rider name	9		
Tel. No			
Instructor			