

2017
HORSEBACK RIDING CAMP
REGISTRATION FORM
Morgan Farm, USMA West Point

Thank you for signing your child/children up for our Summer Riding Camp. We hope this will be a fun learning experience for our campers. Below is a brief list of information. If you have any further questions, concerns, or comments, please call 845-938-3926

1. Cost is \$300.00 per full week. Mini -Camps are 180.00. Non-DoD add \$5.00 per session. Children of deployed soldiers receive a 10% discount, 5 day camps are \$270.00 & 3 day camps are \$162.00 Make checks payable to IMWRF, Visa / MasterCard , cash also accepted. Form and payment can be dropped off at Morgan Farm or mailed to;
Morgan Farm
681 Hardee Place
DFMWR 2nd floor
West Point, NY 10996

Registration forms can also be e-mailed back to; **morganfarm@westpointmwr.com**. When the registration is received you will be called so payment can be made over the phone by Visa/MC .

Payment is due at time of registration. Children will not be considered registered unless payment has been made and confirmed.

Please fill out one form per child

2. Children are to bring their own lunches, snacks, and drinks. Refrigerator and freezer on premises. NO GLASS BOTTLES PLEASE.
3. Shoes/Boots with a small heel are recommended for safety. Children will not be allowed to work with horses if they are wearing sandals, jelly shoes, or soft soled canvas sneakers.
4. Helmets are mandatory and are provided by the barn. Children can bring their own, but it must have an attached safety harness/S.E.I. approved. Bicycle helmets are not allowed.
5. Dress appropriately for being at the barn. Children in beginner and intermediate camps cannot wear shorts of any kind/Capris for riding. Children in intermediate camps should bring old shorts, sneakers, and t-shirt, daily.
6. Sunscreen and insect repellent are recommended.
7. Please be prompt when picking up children. Our Instructors often have lessons after camp is done.
8. Riding camp is a "hands on" camp. If your child has allergies (air born, food etc.) please let us know. Children are exposed to horse and cat dander, hay, dust, pollens, bugs and the sun.

*Office Use Only - payment type;*_____ *check #*_____

*Amount;*_____ *Bal Due;*_____

Please fill out information below:

I, _____, Parent/Guardian of _____
give consent for an authorized Morgan Farm representative to take my child(ren) for care, (medical or dental), in an emergency situation where the child's condition represents a serious or imminent threat to his or her life, health or well-being. I understand that a conscientious effort will be made to notify me prior to such action, and the expense, if any, will be borne by me. Treatment at an Army medical facility may be provided without additional consent under the provision of AR 40-3, paragraph 2-24b.

DATE:_____ SIGNATURE:_____

		check	or	Circle 3 days
CAMP SESSION:	DATE:_____ 2017 TO _____ 2017	5 DAY_____		3 DAY M T W T H F
	DATE:_____ 2017 TO _____ 2017	5 DAY_____		3 DAY M T W T H F
	DATE:_____ 2017 TO _____ 2017	5 DAY_____		3 DAY M T W T H F
	DATE:_____ 2017 TO _____ 2017	5 DAY_____		3 DAY M T W T H F
	DATE:_____ 2017 TO _____ 2017	5 DAY_____		3 DAY M T W T H F

PARENT/GUARDIAN PHONE #'s:_____

EMAIL ADDRESS:_____

ALTERNATE EMERGENCY CONTACT:_____

PHONE:_____

Is this person designated to pick up child?_____

PLEASE LIST CHILD'S ALLERGIES (if any):

MEDICATIONS TAKEN (IF ANY) DOSAGE AND HOW OFTEN :

___ If you would like a receipt for tax purposes please check here

MORGAN FARM
US Army Garrison@ West Point
Release and Hold Harmless Agreement

The undersigned, being desirous of using or renting a horse, saddle and bridle from West Point IMWRF, does hereby, and as an inducement to the said above Fund to allow the use of or renting a horse, saddle and bridle to the undersigned, does hereby forever release, acquit and discharge said above Fund and the United States of America and its employees forever from any kind and all cause or causes of action, including personal injury, illness, death and property damage, costs, charges, claims, demands and liabilities of whatever kind, name or nature in any manner arising out of the use, enjoyment, and control, over the said horse, saddle and bridle. Instances include the possibility of the saddle or bridle becoming loose or breaking, the saddle falling from the horse, the rider being thrown from the horse by reason of the saddle becoming/being loose or the bridle breaking, or the nature/actions of the horse, rider or any other person or animals whatsoever, whether in the stable, paddock, trails or pasture.

This release is intended to cover all injuries, fatal or nonfatal, and illnesses of every name, type, kind or nature and personal property damage, if any, which may be or which might be sustained or suffered from any cause whatsoever connected with, arising out of, or by reason of, the use of the said horse, bridle and saddle.

The undersigned agrees that he/she will indemnify and will hold harmless the Fund from any and all costs, charges, claims, demands and liabilities of any kind arising from the improper or negligent use by the undersigned of the horse, bridle, saddle or other equipment or arising from the willful or negligent acts of the undersigned.

The undersigned agrees that he/she will exercise reasonable care in the use of the horse, bridle, saddle and other equipment and will return the same to the Fund in the same good condition in which it was received from the Fund.

Minors, children 18 years of age or younger, must have the consent of their guardian and be accompanied by their guardian.

Applicant/host/guardian_____ **Date:**_____

Name(Please Print)

Signature

List minor covered under this agreement:

Name_____ **Age**_____