

PROGRAM INFORMATION

Who can attend?

Anyone who is at least eight years of age at the time of registration.

How much will it cost?

The total fee for each one-week session is \$250 with a non-refundable deposit of \$100 due at the time of registration. Camp sizes are limited, so early registration is encouraged.

What level of riding experience should my child have?

Whether a beginner, intermediate or experienced rider, your child will be placed on a horse that fits their needs. All levels of riders are welcome!

What should my child wear?

Jeans, jodphurs, breeches, schooling tights, stirrup pants, or spandex pants and t-shirts should be worn. **Sun screen** and **bug spray** should be applied prior to arrival. Smooth-soled boots with a heel are the preferred footwear. Tennis shoes may be worn. **NO SHORTS, OPEN-TOED SHOES, CLOGS, SLIP-ON SHOES OR FLIP-FLOPS.** Campers **MUST** wear helmets. The Riding Center provides ASTM/SEI certified helmets for use by our students. To ensure proper fit, you may want to purchase your own. Our Tack Shack carries a variety of styles and colors to choose from.

What should my child bring?

We strongly suggest that each child bring a **SMALL** individual cooler filled with water each day. Personal property should be clearly marked with the child's name. Sodas are available from the vending machine for 50ϕ , with correct change.

What to leave at home!

Cell phones may be brought, but kept "OFF" during camp hours and around our equine friends. The Riding Center does not assume responsibility for any damaged, loss, or stolen personal items.

Can I bring my own horse?

ABSOLUTELY! You can stable your equine friend for a daily rate of \$15. Please call ahead to reserve a stall and provide a copy of your horse's current coggins.

What if I have more questions?

Call The Riding Center at (618) 539-3903, or visit us on the web at www.theridingcenterinc.com.



W Have a GREAT time!

DO'S AND DON'TS

further understand that no refund will be given for any my child(ren) be dismissed. Parent/Guardian: Parent/Guardian: (If there are two custodial parents/guardians, both and understand that if I don't, then my parent(s)/guardismissed from the program immediately. Participant: Participant:	Date:	
my child(ren) be dismissed. Parent/Guardian: Parent/Guardian: (If there are two custodial parents/guardians, both and line is a second of the second of t	Date: Date: Date: Date: must sign.) mer Horsemanship Program Do's and Don'ts	
my child(ren) be dismissed. Parent/Guardian: Parent/Guardian:	Date: Date:	
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my child(ren) be dismissed. Parent/Guardian:	Date:	
•	unused portion of fees for the program should	
I/We acknowledge that I/we have received a copy of the or infraction thereof may cause the immediate dismiss	ssal of my child(ren) from the program. I/We	
Good manners are always appreciated!		
Observe cell phone courtesy. Cell phones should our equine friends.	be kept "OFF" during camp hours and around	
Obey program leaders.		
Respect The Riding Center horses, tack, and facil	lities at all times.	
If the horse assigned to you creates a mess (natural	al or otherwise), please clean it up.	
W Helmets MUST BE WORN while mounted.		
Stay off and away from horses unless properly supervised by program personnel.		
Stay off and away from horses unless properly su		
Have a good attitude at all times.Stay off and away from horses unless properly su		

The Riding Center, while retaining the other for your own records.)



W Have a GREAT time!

Make new friends.

DO'S AND DON'TS

W Have a good attitude at all times.	
U Stay off and away from horses unless proper	ly supervised by program personnel.
Helmets MUST BE WORN while mounted	
If the horse assigned to you creates a mess (r	natural or otherwise), please clean it up.
Respect The Riding Center horses, tack, and	facilities at all times.
U Obey program leaders.	
Observe cell phone courtesy. Cell phones sho our equine friends.	ould be kept "OFF" during camp hours and around
Good manners are always appreciated!	
or infraction thereof may cause the immediate di	of these policies and understand that any violation smissal of my child(ren) from the program. I/We rany unused portion of fees for the program should
Parent/Guardian:	Date:
Parent/Guardian:	Date:
(If there are two custodial parents/guardians, b	ooth must sign.)
	Summer Horsemanship Program Do's and Don'ts)/guardian(s) will be contacted and that I may be
Participant:	Date:
	vided. Please complete and return a copy to

(Two copies of this document are being provided. Please complete and return a copy to **The Riding Center**, while retaining the other for your own records.)



ATTENDANCE PERMISSION FORM

I/We hereby grant permission for	arrant that my child is physically fit ip Program. I/We hereby agree to agents, employees, and/or volunteer property loss or damage that may ion to The Riding Center to secure
My/our child has the following medical conditions/restrictions aware of (including allergies): □ None □ Those listed be	
Physician's Name (In case of emergency):	
Physician's Phone Number: () Preferred Hospital (In case of emergency):	
Signature of Parent/Guardian	Date:
Signature of Parent/Guardian	Date:

(If there are two custodial parents/guardians, both must sign)

PLEASE COMPLETE BOTH SIDES OF THIS FORM.

Printed Name(s) of Parent(s)/Guard	lian(s)
Father's Work Phone	Mother's Work Phone
Home Phone	Cell Phone
Street Address	
City, State, Zip	
In the event of an emergency, I can b	pe reached at ()



PERMISSION FOR PHOTO/VIDEO USE

Name(s) of Participant(s):	
I/We understand that photograph(s) and/or video on either the World Wide Web, a part of the interned purpose of marketing the Saddle Up Summer Hors any photos and/or videos of my child(ren), either anyone using the internet or receiving information home address, and telephone number will <i>not</i> app video.	et, in written publications, or on video for the sole emanship Program. I/We further understand that individually or in a group, will be accessible to on about the program. My child(ren)'s name(s),
By signing below, I/we grant permission for the pulvideo as described above on the internet or in www.theridingcenterinc.com.	
Parent/Guardian:(Signature)	Date:
Parent/Guardian:(Signature)	Date:
(If there are two custodial parents/guardians, bo	oth must sign.)
I/We, the participant(s), also give my/our permiss	ion for such publishing.
Participant:	Date:
Participant:	Date:
Participant:	Date:

EQUINE RIDING and/or DRIVING and/or TRAINING INSTRUCTION and/or LESSONS and/or TRAIL RIDES AGREEMENT LIABILITY RELEASE AND ASSUMPTION OF RISK AGREEMENT [FOR INDIVIDUALS]

The Riding Center Inc.

READ CAREFULLY AND COMPLETE ALL SECTIONS BEFORE SIGNING

REGISTRATION OF STUDENT AND AGREEMENT PURPOSE I, the following listed individual, and the parents or legal guardians thereof if a minor, do hereby voluntarily agree to participate in equine related instruction as a student of THIS STABLE, and that I will either utilize my own horse or school horses provided by THIS STABLE for instruction purposes.

	1. Rider Name:	2. Age (8 and up for Trail Rides)	3. Beginner (under 10 hours)
	4. Email:	5. Weight (limitations may apply)	Over 10 hours of Experience
ALL ↓	oes this student have any physical or mental condition(s), which may affect his/her safety and ability to ride, drive or train a horse? No you checked "Yes" how can we help this student with his/her special needs? MEDICAL INSURANCE I/WE AGREE THAT: Should medical treatment be required, I and/or my medical insurance company shall pay for such incurred expenses. MEDICAL INSURANCE COMPANY: Policy # No Medical Insurance		
	A. AGREEMENT SCOPE AND TERRITORY AND DEFINITIONS This agreement shall be legally the estate, assigns, including all minor children, and personal representatives; and it shall be intragreement is intended to be valid and binding at all times now and in the future when THIS property, be near any horse, receive riding and / or driving and / or training instruction or goor off of THIS STABLE'S property. Any disputes by the rider shall be litigated in, and venue shand inclusive as the law permits. If any clause, phrase, or word is in conflict with state law, to species. The terms "I", "WE", "ME", "MY" shall herein refer to the above registered student	erpreted according to the laws of the state and county of STABLE permits me (directly or indirectly) to enter THIS suidance from its associates and / or when I ride and / or all be the county in which THIS STABLE is physically locathen that single part is null and void. The terms "HORSE"	of THIS STABLE'S physical location. This STABLE'S property, be on THIS STABLE'S drive and / or train and / or am near horses on ted. This agreement is intended to be as broad
	B. INHERENT RISKS / ASSUMPTION OF RISKS I/WE ACKNOWLEDGE THAT: Risks, conditions, feasible safety measures which can be taken, and I agree to assume them. The inherent risk may result in injury, harm, death, or loss to persons around the animal; The unpredictability Hazards, including, but not limited to, surface or subsurface conditions; A collision and/or contivity participant in a negligent manner that may contribute to injury, harm, death, or loss equine and/or, failing to act within the ability of the participant. Horses are 5 to 15 times lat the ground it will generally be at a distance of from 3 1/2 to 5 1/2 feet, and the impact may smaller, weaker predator animal (the human) tries to impose its will on, and become one unand each has a limited understanding of the other. If a horse is frightened or provoked it manot limited to: Stopping short; Spinning around; Changing direction and/or speed at will; Shithese are just some of the risks and I agree to assume others not mentioned above. I am no	is include, but are not limited to any of the following: The of a equine's reaction to sounds, sudden movement, un infrontation with another equine, another animal, a hun to the participant or to other persons, including but not ager, 20 to 40 times more powerful, and 3 to 4 times fast result in harm to the rider. Horseback riding, driving, annit of movement with, another much larger, stronger prepay divert from its training and act according to its natural fiting its weight; Bucking; Rearing: Kicking; Biting; and/or	e propensity of a animal to behave in ways that familiar objects, person, or other animals; nan, or an object; The potential of an equine limited to failing to maintain control over an er then a human. If a rider falls from a horse to d training are activities in which one much ey animal that has a mind of its own (the horse) survivor instincts which may include, but are
	C. CONDITIONS OF NATURE WARNING, UNFAMILIAR AND SUDDEN SIGHTS, SOUNDS, AND NOT responsible for total or partial acts, occurrences, or elements of nature and / or sudder react in some other unsafe way. SOME EXAMPLES ARE: Thunder, lightening, rain, wind, wild person; and irregular footing on out-of-door groomed or wild land which is subject to constandscape. I also understand that these are just some of the risks and I agree to assume othe student and parent or legal guardian have inspected THIS STABLE'S facilities and are satisfied upon THIS STABLE'S premises.	n and / or unfamiliar sights, sounds and / or sudden mov and domestic animals, insects, reptiles, which may walk ant change in condition according to weather, temperatu ers not mentioned above. I am not relying on THIS STABI	ements that can scare a horse, cause it to fall, or , run, or fly near, or bite or sting a horse or rue, and natural and man-made changes in LE to list all possible conditions for me. The
	f D. SADDLE GIRTHS / NATURAL LOOSENING WARNING I / WE ACKNOWLEDGE THAT: Saddle or attendant of any girth looseness so action can be taken to avoid slippage of saddle and the same of		during riding. Students must alert the instructor
	E . PROTECTIVE HELMET / HELMET WARNING I / WE AGREE THAT: I for myself and on behalf headgear / helmet, which meets or exceeds the quality standards of the SEI CERTIFIED ASTM / or being near horses, and I understand that the wearing of such headgear / helmet at thes death from happening as the result of a fall and other occurrences. THIS STABLE and / or its	I STANDARD F 1163 Equestrian Helmet, should be worn e times may reduce severity of some of the wearer's hea	while riding and / or driving and / or training and ad injuries and possibly prevent the wearer's
	F. LIABILITY RELEASE I/WE AGREE THAT: In consideration of THIS STABLE allowing my partic child and / or legal ward, heirs, administrators, personal representatives or assigns, do agree directors, representatives, assigns, members, owners of premises and trails, affiliated organ "Associates"), of and from all claims, demands, causes of action and legal liability, whether the ASSOCIATE'S ordinary negligence or legal liability; and I do further agree that except in the claims, demands, legal actions and causes of action, against THIS STABLE and ITS ASSOCIATE death and / or property damage, sustained by me and / or my minor child or legal ward in reference or otherwise being near horses owned by me or owned by THIS STABLE, or in the care, custon THIS STABLE'S premises.	e to release, hold harmless, and discharge THIS STABLE, i izations, and Insurers, and others acting on their behalf the same be known or unknown, anticipated or unanticipevent of THIS STABLE'S gross negligence and / or willful a S as stated above in this clause, for any economic and nelation to the premises and operations of THIS STABLE, t	its owners, agents, employees, officers, (hereinafter, collectively referred to as bated, due to THIS STABLE'S and / or ITS and / or wanton misconduct, I shall not bring any on-economic losses due to bodily injury and / or o include while riding, driving, training, handling,
	G . EQUINE ACTIVITY LIABILITY ACT (745 ILCS 47 /) WARNING OR LANGUAGE: This clause ap ACTIVITY LIABILITY ACT WARNING OR LANGUAGE, a copy of which is attached hereto and in EALA WARNING OR LANGUAGE IS ATTACHED TO THIS AGREEMENT. EQUINE ACTIVITY LIABI an equine activity expressly assumes the risk of engaging in and legal responsibility for injury	corporated as if fully set forth herein. INSTRUCTION TO S LITY ACT WARNING: "WARNING Under the Equine Activ	SIGNERS: DO NOT SIGN UNLESS A COPY OF THE ity Liability Act, each participant who engages in
	SIGNER STATEMENT OF AWARENESS		
	I/WE, THE UNDERSIGNED, REPRESENT THAT I/WE HAVE READ AND DO UNDERSTAND THE FOREGOING AGREEMENT, LIABILITY RELEASE AND ASSUMPTION OF RISK AGREEMENT. I/WE UNDERSTAND THAT BY SIGNING THIS DOCUMENT I AM GIVING UP RIGHTS TO SUE TODAY AND IN THE FUTURE. I/WE ATTEST THAT ALL FACTS ARE TRUE AND ACCURATE. I AM SIGNING THIS WHILE OF SOUND MIND AND NOT SUFFERING FROM SHOCK, OR UNDER THE INFLUENCE OF ALCOHOL, DRUGS OR INTOXICANTS.		
_	SIGNATURE OF STUDENT (Spouses must sign for themselves)	DATE	
	SIGNATURE OF PARENT, GUARDIAN AND / OR SPOUSE #1 SIGN ADDRESS IN FULL:	ATURE OF PARENT, GUARDIAN AND / OR SPOUSE #2 PHONE#	DATE
	EMERGENCY CONTACT: RELA	.TIONSHIP: PHONE#	

HORSE ACTIVITIES WARNING, RISK REDUCTION, AND ASSUMPTION OF RISK AGREEMENT

Name Of Entity Providing These Warnings [Hereinafter known as "THE PROVIDER"]

	8162 Red Ray Mine Rd Freeburg IL
	Address Of THE PROVIDER
	READ CAREFULLY AND COMPLETE ALL SECTIONS BEFORE SIGNING
NITIAL ALL	REGISTRATION OF STUDENT AND AGREEMENT PURPOSE I, the following listed individual, and the parents or legal guardians thereof if a minor, do hereby voluntarily agree to participate in equine related instruction as a student of THIS STABLE, and that I will either utilize my own horse or school horses provided by THIS STABLE for instruction purposes.
\downarrow	Rider Name:
	A. AGREEMENT PURPOSE I / We the undersigned recipient(s) of this form, and the parents and / or legal guardians thereof if a minor, are hereby provided with the warnings that follow concerning the inherent risks and risk reduction suggestions related to my / our involvement with horses and horse activities. I / WE understand that this form also contains an agreement that I / WE assume all the risks related to horse activities. I / WE acknowledge that these warnings and suggestions pertain only to some of the risks of and risk reduction suggestions for horse activities and that I / WE agree to assume others not stated in this form. I / WE are not relying on THE PROVIDER to list all possible risks for me
	B. DEFINITIONS The terms "HORSE" and "EQUINE" herein shall refer to all equine species. The term "PARTICIPANT" shall herein refer to a person who rides a horse mounted or otherwise handles or comes near a horse from the ground, and also to anyone who drives or is a passenger on a horse drawn vehicle and / or who otherwise comes near to such a vehicle and horse(s). The terms "I", "WE", "ME", "MY" shall herein refer to the recipient(s) of this form as stated on page 2 of this form and the parents and / or legal guardians thereof if a minor
	C. FOOT PROTECTION I ACKNOWLEDGE THAT: PARTICIPANTS should wear firmly constructed, smooth-full-soled boots or shoes that cover the ankle and have at least 1 inch heels. Such boots or shoes provide protection for the feet in the event a horse steps on a foot, and also to assist in preventing the foot from slipping all the way through the stirrup and becoming caught while riding, mounting, dismounting, and / or at other times. Wearing soft socks provides additional protection against chafing and allows for easier removal of the foot from the boot.
	D. CLOTHING I ACKNOWLEDGE THAT: PARTICIPANTS should wear ankle length, flexible stretch or moderately loose fitting pants to protect legs and to allow for speed and ease of movement. Riders should also consider wearing equestrian pants, breeches or jodhpurs which have leather (or similar material) inner knee / calf patches, or chaps, or other leggings that provide inner leg grip and enhanced stability in the saddle.
	E. TYING, WRAPPING, OR FASTENING PARTICIPANTS TO HORSE AND HORSE DRAWN VEHICLES I ACKNOWLEDGE THAT: It is excessively dangerous to secure, tie, wrap, strap, or fasten any PARTICIPANT, rider, or passenger onto a horse or onto a horse drawn vehicle, or to a saddle, lead rope, lunge line, rein, or other tack or equipment that is attached to a horse, or a horse drawn vehicle.
	F. PROTECTING ARMS, HANDS AND FINGERS FROM INJURY OR LOSS WHEN TYING A HORSE: I / WE ACKNOWLEDGE THAT: The PARTICIPANT should avoid putting fingers and / or hands and / or arms through, into or under the loops or wrapping or winding of a lead rope, lunge line, rein or other device when or while tying, trying to control, or otherwise handle a horse. Horses can become frightened and pull back without warning, and the speed, weight, strength, and the force of the movement can cause severe injury and harm to the body of the PARTICIPANT that may include the loss of a hand or finger or arm.
	G. CARRY-ON OBJECTS WARNING AND SHARP, LOUD NOISES WARNING I / WE ACKNOWLEDGE THAT: 1. When approaching, mounting and riding horses, the PARTICIPANT must not carry loose items that may fall or blow away or flap in the wind or bounce or make sharp or loud noises, the action of which may scare horses causing them to react in unsafe ways. (SOME EXAMPLES ARE: Cameras, cell phones, hats not securely fastened under chin, toys, purses, devices such as watches with alarm noises.) 2. When near or riding a horse, PARTICIPANT
	H. SADDLE GIRTHS / NATURAL LOOSENING WARNING I / WE ACKNOWLEDGE THAT: Saddle girths (fastener straps around horse's belly) may loosen during riding. Students must alert the instructor or attendant of any girth looseness so action can be taken to avoid slippage of saddle and the potential for the rider to fall from the horse.
	1. PROTECTIVE HELMET / HELMET WARNING I / WE AGREE THAT: I for myself and on behalf of my child and /or legal ward have been fully warned and advised by THIS STABLE that protective headgear / helmet, which meets or exceeds the quality standards of the SEI CERTIFIED ASTM STANDARD F 1163 Equestrian Helmet, must be worn while riding and / or driving and / or training and, or being near horses, and I understand that the wearing of such headgear / helmet at these times may reduce severity of some of the wearer's head injuries and possibly prevent the wearer's deat from happening as the result of a fall and other occurrences. THIS STABLE and / or its associates provide a SEI certified headgear / helmet for all horse riders.
	J. DOUBLE RIDING I / WE ACKNOWLEDGE THAT: PARTICIPANTS / Riders are at increased risk of harm when riding double on one horse, that is, two riders on one horse. Therefore not allowed.
	K. CHILD AND ADULT SUPERVISION AROUND HORSES AND OTHER ANIMALS I / WE ACKNOWLEDGE THAT:
	1. Supervision of some persons may be important to their safety due to the inherent risks involved with being around large livestock such as horses, and other unpredictable animals. When at a premises where one is in close proximity to such animals, the following individuals should be under constant supervision and guidance of a parent, legal guardian, or other adult supervisor specifically appointed by the parent or guardian: Children under 12 years of age; Children under legal age who lack seasoned experience with horses and other animals; and Any child with behavior problems and some persons of any age who are mentally and / or physically disabled.
	2. Before an adult, alone or with a child, approaches a horse or other animal that is owned by another party, he or she should seek the owner's or handler's permission and supervision.
	L. EQUINE ACTIVITY LIABILITY ACT (745 ILCS 47 /) WARNING OR LANGUAGE: This clause applies for operations located in IL. I / WE acknowledge that I have reviewed this state's EQUINE ACTIVITY LIABILITY ACT WARNING OR LANGUAGE, a copy of which is attached hereto and incorporated as if fully set forth herein. INSTRUCTION TO SIGNERS: DO NOT SIGN UNLESS A COPY OF THE EALA WARNING OR LANGUAGE IS ATTACHED TO THIS AGREEMENT. EQUINE ACTIVITY LIABILITY ACT WARNING: "WARNING Under the Equine Activity Liability Act, each participant who engages in an equine activity expressly assumes the risk of engaging in and legal responsibility for injury, loss, or damage to person or property resulting from the risk of equine activities."

SIGNER STATEMENT OF AWARENESS

I/WE, THE UNDERSIGNED, REPRESENT THAT I/WE HAVE READ AND DO UNDERSTAND THE FOREGOING AGREEMENT, LIABILITY RELEASE AND ASSUMPTION OF RISK AGREEMENT. I/WE UNDERSTAND THAT BY SIGNING THIS DOCUMENT I AM GIVING UP RIGHTS TO SUE TODAY AND IN THE FUTURE. I/WE ATTEST THAT ALL FACTS ARE TRUE AND ACCURATE. I AM SIGNING THIS WHILE OF SOUND MIND AND NOT SUFFERING FROM SHOCK, OR UNDER THE INFLUENCE OF ALCOHOL, DRUGS OR INTOXICANTS.

SIGNATURE OF STUDENT/ RIDER (Spouses must sign for themselves)	PRINT NAME OF RIDER	DATE