



CEDARHILL FARM

Summer Camp Registration 2024

CAMPER'S NAME _____ AGE _____

HEIGHT _____ WEIGHT _____

ADDRESS, ZIP _____

CELL PHONE _____ Parent Cell Phone _____

EMAIL _____ Additional EMAIL _____

Mother's Name _____ Father's Name _____

Circle Level of Horseback Riding Experience:

No Lesson Experience Trail Riding Lessons: W/T W/T/C Crossrails

Any special Learning Styles or Physical Restrictions? _____

Please note the week(s) you wish to enroll in. Please check camp availability on our web site. We try to keep it current!

Horsemasters Camp 2024 weekly fee \$625: June 10-14, June 17-21, July 15-19, July 22-26

Showmanship Camp 2024 weekly fee \$700: June 24-28, July 29-August 2

Intermediate Camp 2024 weekly fee \$775: July 8-12, August 5-9

Extended Day care @ \$25/day is available. Please note the days you will need this service and include with your final payment, which is due on the first day of camp.

All camp spaces are filled on a first come first served basis. A **non-refundable** deposit of \$250.00 is required for each Camp session. Please complete the above registration form. Send it with a deposit to: Cedarhill Farm 2620 Waxhaw Marvin Rd Waxhaw, NC 28173

RELEASE & HOLD HARMLESS AGREEMENT The Undersigned assumes the unavoidable risks inherent in all horse related activities, including but not limited to bodily injury and physical harm to rider, spectator and horse. In consideration, therefore, for the privilege of riding and/or being around horses at Cedarhill Farm, Inc., located at 2620 Waxhaw Marvin Road, Waxhaw, NC the Undersigned does hereby agree to hold harmless and indemnify Cedarhill Farm, Inc. and staff, and further release them from any liability or responsibility for accident, damage, injury, or illness to the Undersigned or to any horse owned by the Undersigned or to any family member or spectator accompanying the Undersigned on the premises.

WARNING! Under North Carolina Law, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in equine activities resulting exclusively from the inherent risks of equine activities. Chapter 99E of the North Carolina Statutes.

MEDICAL CARE INSTRUCTIONS

In the event of a medical emergency, Cedarhill Farm, Inc. and its staff has my permission to seek medical care for:

Please list any allergies to medicine or insect bites: _____

As needed, Cedarhill may give me, or my child the following: (Please circle)

Benadryl (oral, for insect bites) • Children's Tylenol Children's Advil • Sunscreen Topical Sting Medication

In the event of a medical emergency that requires ambulatory transportation, I request that I (the rider) be taken to:

Hospital/Medical Facility _____

Primary Physician _____ # _____

Please check box to confirm that you have read and agreed to our camp policy before signing below.

Date _____

Signature of Rider or Parent/Guardian if rider is a minor.