



# Cameron Equestrian Center 2010 Camp Registration Form

## Camper Information:

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

How did you hear about Camp? \_\_\_\_\_

## Campers Riding Ability:

**Beginner** – Little or no riding experience or lacks confidence

**Novice** – Can ride a gentle horse at a walk, perhaps trot a little

**Intermediate** – Can walk, trot, canter, but needs to improve skills

**Advanced** – Previous experience and instruction, good form and control

Comments about riding experience: \_\_\_\_\_

\_\_\_\_\_

## Desired Camp Weeks:

*[Please check all that apply]*

~~Mar 15 – Mar 19~~

June 7 - June 11

June 14 - June 18

~~June 21 – June 25~~

June 28– July 2

July 5 - July 9

July 12 - July 16

July 19 - July 23

July 26 – July 30

~~Aug 2 – Aug 6~~

Aug 9 – Aug 13

Aug 16 – Aug 20

The cost of Camp is \$295 per participant.  
**per camp**, must accompany registration Form.

## Items needed for Camp:

1. Riding boots: English riding “paddock” boots or tall boots are best. Boots must have a low heel, and cover the ankle.( Tennis Shoes are not acceptable for riding)
2. All campers need to arrive in long pants and boots.
3. Campers may bring a change of clothes, such as shorts and tennis shoes; to change into after work with the horses is completed.
4. Camper will be responsible for their own lunch each day.
5. Swimming suit is needed on Wednesday and Thursday to go to the pool



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**Proof of Immunization:** State Law requires that parents provide proof of the latest immunizations each year, before camp. No child will be allowed to attend camp without proof, and no refunds issued for that reason.

DPT: \_\_\_\_\_ POLIO: \_\_\_\_\_ HIB: \_\_\_\_\_ MMR: \_\_\_\_\_ TB: \_\_\_\_\_

Allergies/conditions: \_\_\_\_\_

Other things we should know about your child (physical, mental, social, psychological) \_\_\_\_\_

## Contact Information:

### Parent/Guardian:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Parent/Guardian:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Alternate Contact:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Professional Contact:

Doctor's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Boarding - Training -**

512.272.4301 – Marleta Lillejord, Owner  
13404 Cameron Rd, Manor, TX 78653

GENERAL RELEASE AND WAIVER

I understand that I have been admitted as a guest of Cameron Equestrian Center (the "Center") based in material part on this General Release and Waiver. I have been fully informed of the nature of the Centers activities and the physical dangers therein. As a guest of the Center I intend to and will engage in dangerous physical activities and classes on the Center's premises. I understand that these physical activities involve certain risks and exposure to personal injury, which risks and exposure I voluntarily assume for myself and any member of my family, including family who visit the Center. I hereby acknowledge the inherent risks involved in riding and working in close proximity to horses among other risks, and I further acknowledge that both horse and rider can be injured in normal use or in competition and schooling, including any transportation provided by the Center.

I fully understand that riding, horseback riding and foxhunting (which includes riding over fences and other obstacles, and steep and rough terrain) are VERY dangerous activities. I fully understand that riding is a very dangerous activity with many inherent risks including (i) The propensity of an equine to behave in dangerous and unpredictable ways which may result in injury to the rider, trainer, groom and handler, (ii) The inability to predict an equine's reaction to sound, movements, objects, persons or animals, (iii) Hazards of surface or subsurface conditions and riding over unknown terrain where hazards may be hidden by vegetation or development. I wish to participate in these activities knowing they are dangerous. I wish to accept transportation to and from events and activities provided by the Center. I accept and assume all the risks of injury (including death) to me and/or my property.

In Consideration for the privilege of riding and working around horses at the Center, I do hereby agree to hold harmless and indemnify the Center, its Owners, Directors, and officers, trainers, staff, and other guests of the Center, and the Centers staff and further release them from any liability or responsibility for accident, damage, injury, illness or death while on the premises of the Center or while participating of off premises activities with the Center, including Horse Shows, Events, Exhibitions, Swimming pool and any other activities related to my participation in events on or off the Center's property.

In Consideration of mutual covenants contained herein and other good and valuable consideration, including use of the Center's facilities and the admission of my family including children, the receipt and sufficiency of which is hereby acknowledged, I hereby release in full and forever discharge the Center, its Directors, Officers, Shareholders, Agents and Employees, and all other members of my family, our Representative Heirs, Executors, Administrators and Personal Representatives, from any and all injury, liability, damages, claims, demands, and/or causes of action relating to or deriving from any injury to me or any member of my family, including children, during or arising out of the use of the Center facilities, transportation provided by the Center, or participation in any Center event (e.g. classes, seminar, camp, etc.) including all risk connected therewith, whether foreseen or unforeseen.

I also agree that if anyone makes a claim because of injury to me (including death), or for any damage to my property, I will keep those released by this agreement free of any damages or costs because of those claims. Furthermore, my signature hereby also indicates my agreement to wear a hard hat at all times while riding at the Center as long as I am under the age of 18 or while jumping.

Furthermore, by signing this agreement, I and all parties aforementioned, also agree that any and all claims, disputes or controversy shall be exclusively resolved by first trying to settle by mediation, failing which, the settlement of the dispute shall be by binding arbitration under the Texas Alternative Dispute Resolutions Act.

I also agree that this agreement as well as any and all actions resulting from my participation or interaction with the Center shall be governed exclusively by Texas State Law.

Print Name (Participant): \_\_\_\_\_ D.O.B \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Print Name (Parent/Guardian): \_\_\_\_\_ Relationship: \_\_\_\_\_

\_\_\_\_\_  
Signature (Participant/Parent/Guardian)

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Hm Ph: \_\_\_\_\_ Wk Ph: \_\_\_\_\_ Cell: \_\_\_\_\_