

Ivy Hill Therapeutic Equestrian Center

Mailing/ Program Location: 1811 Mill Road, Perkasie, PA 18944

Phone: 215-822-2515

Email: executive.director@ivyhillequestrian.org

SUMMER CAMP 2024 REGISTRATION



Name: _____

Date of Birth: _____

Age: _____

Height: _____

Weight: _____

Complete Address: _____

Primary Phone Number:

Secondary Phone Number:

Email Address:

How did you hear about us?

Current Rider

Word of Mouth

Friend of Current Rider

Other: _____

Newspaper Ad

In Case of Emergency Please Contact:

1- Name: _____

Relationship: _____

Contact Numbers: _____

2- Name: _____

Relationship: _____

Contact Numbers: _____

Physician office/Name: _____

Phone: _____

Allergies or Medical Conditions you feel we should be aware of:

Medications**

- I take emergency medications only (epi pen, inhaler, seizure meds)

Medication	Dosage	When to administer (ex: seizure lasting 5 min, when stung)

- I take daily medications between the hours of 9 and 2:30 pm.

Ivy Hill is unable to administer any non-emergency medications and a nurse will need to be hired. We ask that if possible, to have individuals take medications before or after camp. If you are not able to arrange this, please complete the below section:

Medication	Time	Dosage	Administration Instructions

I would like to register for the following week(s): Hours 9:00 am - 2:30pm

Check Week	Dates:	Session Fee FULL WEEK	Session Fee 3 DAY
	Week 1: June 24 th – June 28 th	\$425	\$255
	Week 2: July 8 th – July 12 th	\$425	\$255
	Week 3: July 22 nd – July 26 th	\$425	\$255
	Week 4: August 5 th – August 9 th	\$425	\$255
	Week 5: August 19 th – August 23 rd	\$425	\$255

Total number of week(s)

_____ x \$425=
\$ _____

\$10 discount per week for multiple weeks

_____ x \$10=
\$ _____

\$100 deposit per week if not paying in full

_____ x \$100=
\$ _____

Total Due:

\$ _____

Balance due by June 1st

\$ _____

Payment

- ❖ Payment for camp must be received no later than June 1st for summer camp
- ❖ Payment can be made by check or credit card
- ❖ There is a non-refundable deposit of \$100 per session
- ❖ Any balance due **MUST** be paid **on or before** June 1st
- ❖ Sessions are filled on a first come basis. If the week of your choice is full, you may ask to be put on the wait list.
- ❖ We are not offering before care or after care this year.

Attendance and Cancellation Policy

- ❖ **NON-EMERGENCY CANCELLATION**---We understand that things come up but there are no refunds and no make ups for summer camp.
- ❖ **LATE ARRIVALS**---If you will need to come in late or leave early please let camp staff know ahead of time so we can do our best to ensure you do not miss riding time.
- ❖ **Please plan arrival no earlier than 10 minutes before the start of camp. Doors will not open until 8:50.**
- ❖ Please plan pickup no later than 10 minutes after the conclusion of camp. Any later pickup may be charged extra.
- ❖ **EMERGENCY CANCELLATIONS**---Camp will go on regardless of weather and activities will be adapted if needed. In extreme heat, we will ride the first hour of camp to help our riders and horses deal with the heat.

Please sign here that you have read and will comply with these policies:

Client (Parent or guardian of client) signature

Date



Liability Forms

Name: _____ Date of Birth: _____
 Complete Address: _____
 Phone number: home: _____ cell: _____
 Email Address: _____

If under age of 18:

Parents/Guardians: _____
 Address: _____
 Phone Number: _____ Relationship: _____
 _____ Relationship: _____

Allergies or Medical Conditions you feel we should be aware of:

Release and Hold Harmless Agreement

"You assume the risk of equine activities pursuant to Pennsylvania Law."

The program at **IVY HILL FOUNDATION**. provides equine assisted services for disabled children and adults. Volunteers and horses are carefully selected and trained and safety equipment is required for all clients/riders since horseback is a risk exercise. No client/rider will be accepted for riding services and no volunteer accepted for service until this form has been **READ, UNDERSTOOD, COMPLETED AND SIGNED** by the parent(s) or guardian(S) of a minor, or if the student or volunteer is of legal age and sound mind, by the client/rider or volunteer.

Although participation in the program is under strict supervision and every effort is made to avoid injury or accident, the undersigned acknowledges the inherent risks involved in riding and working around horses. This includes bodily injury from horseback riding or being in close proximity to horses. Among other risks, both horse and rider can be injured in normal use or in competition and schooling.

I acknowledge the risks and potential for injury that may occur with the activities of horseback riding and working around horses, and I have discussed these risks with my child/and his/her/my physician. However, I feel that the possible benefits to myself/son/daughter/ward are greater than the risk assumed. Therefore agree to be legally bound for myself(or for my son/daughter/ward) heirs, executors or administrators and do hereby agree to release, hold harmless and indemnify **IVY HILL FOUNDATION**, its Board of Directors, Instructors, Therapists, Aids, Volunteers, its Employees, Supervisors and Associates harmless of any claim for loss, injury or damages of every kind and nature whatsoever while at the **IVY HILL FOUNDATION**, facility located at 1811 Mill Road, Perkasio PA 18944 or while off the property in conjunction with a **IVY HILL FOUNDATION** event or show.

Date _____ Participants Name (Print) _____

Participant or Parent/Guardian Signature _____

Print Parent/Guardian Name (If Applicable) _____

Relationship to Participant _____



Photo and Media Release

I hereby (check one)

consent

do not consent

to and authorize the use and reproduction by Ivy Hill Foundation, Inc. and Ivy Hill Equestrian of any and all photographs and any other audiovisual and printed materials of me (or my son/daughter/ward if participant is under 18 years of age) for the promotional and educational activities or other uses for the benefit of the programs at Ivy Hill.

Print name of Participant _____

Signature of Participant: _____

Is participant under 18 years of age? _____

If yes, Print name of Parent/Guardian: _____

Signature of Parent/Guardian if under 18: _____ Date: _____

Barn and Safety Rules

- ❖ Your safety and well-being is our most important concern. All forms will need to be updated on an annual basis.
- ❖ For safety reasons all children and/or guests who come with you, **MUST STAY WITH YOU AT ALL TIMES** and are not permitted in the barn without express permission of Ivy Hill staff.
- ❖ Participants should arrive at the barn 5 minutes prior to the start of his/her session to allow the maximum use of the scheduled session time. Riders are not to be left unattended in the barn or on the property before the instructor starts the session or after the session. Ivy Hill staff cannot be responsible for supervising participants before or after the session time.
- ❖ Closed-toed footwear is required in the barn.
- ❖ Please do not hand-feed the horses - it can encourage biting. If you want to feed a treat, please ask permission from a staff person first, and place the treat in the horse's feed bucket.
- ❖ No running or yelling in the barn.
- ❖ No dogs allowed near or in the riding rings unless a therapy dog.
- ❖ Please wait for safety information and/or permission from staff members before petting/touching horses.

Name _____ Date _____

Signature _____
