

## ORC Camp Packet

### Summer Camp 2018 Schedule

9:00-12:00

**\$250 Per Session**

**\*Book 2 weeks for \$450**

#### Check the session below-

- June 11th-13th
- June 18th-20th
- June 25th-27th
- July 2nd & 3rd \* \$175.00
- July 9th-11th
- July 16th-18th
- July 23rd-25th
- July 30th-Aug1st
- Aug 6th-Aug 8th

**Min. of 6 Riders per session required to hold each session**

\*No refunds for missed days. No partial week enrollment

Come learn to ride in a safe and fun environment! Oakridge Riding Club's day camps are designed to teach all aspects of horsemanship, safety and horse care.

Attire: long pants and paddock boots or shoes with a heel preferred. Boots and helmets are provided. Hat and sunscreen. Students must bring snacks and water. Come WEARING sunscreen.

Lectures and lessons are given on such topics as-grooming, tack care, proper and safe handling of horses.

Additional activities- arts and crafts plus games.

#### **Cancellation/Refund Policy:**

Minimum of 6 riders required per day for camp to be offered. Should Oakridge Riding Club cancel due to less than 4 riders registered, entire payment (including deposit) will be refunded. Cancellations made after balance due date or camp session has started will not be refunded. In the event of inclement weather, Oakridge Riding Club will offer daycare only. Fun horseless activities and crafts will be done. Oakridge Riding Club reserves the right to substitute the riding portion of camp with other activities due to weather and/or safety issue.

## Oakridge Riding Club Registration Form

**Kelsey Hubert (805) 279-8480**

oakridgeridingclub@gmail.com

<i>* indicates mandatory information</i>	
* Student's Name	<input style="width: 60%;" type="text"/> *Date of Birth <input style="width: 20%;" type="text"/>
* Height	<input style="width: 15%;" type="text"/> * Weight <input style="width: 15%;" type="text"/>
Has he/she been to Oakridge Riding Club before?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Riding Style Experience	English <input type="checkbox"/> Western <input type="checkbox"/> Dressage <input type="checkbox"/> Other <input type="checkbox"/> (Check all that apply)
Does your camper have sibling/friends in the same camp?	Yes <input type="checkbox"/> No <input type="checkbox"/> Please List: <input style="width: 200px;" type="text"/>
* Please list any allergies, ailments, medications or other restrictions:	<div style="border: 1px solid black; height: 40px; width: 100%;"></div>
<p>• Is camper covered by health insurance? Yes <input type="checkbox"/> No <input type="checkbox"/> Insurance Company: <input style="width: 100px;" type="text"/> Policy No: <input style="width: 100px;" type="text"/></p> <p style="text-align: center;">*Health insurance is required for each camp participant in order to attend.</p> <p style="text-align: center;">Parent/Guardian Information (1st)</p> <p>Name: <input style="width: 150px;" type="text"/> Email <input style="width: 150px;" type="text"/></p> <p>Street Address: <input style="width: 150px;" type="text"/> City: <input style="width: 150px;" type="text"/> State <input style="width: 30px;" type="text"/> Zip Code: <input style="width: 60px;" type="text"/></p> <p>Home Phone: <input style="width: 60px;" type="text"/> Cell Phone: <input style="width: 60px;" type="text"/> Work Phone <input style="width: 60px;" type="text"/> Ex <input style="width: 60px;" type="text"/></p>	

Parent/Guardian Information (2nd)

Name:

Email

Street Address:

City:  State  Zip Code:

Home Phone:

Cell Phone:  Work Phone  Ex

**DEPOSIT Payment: \$100 Deposit due with registration. \$150 Balance due by the FIRST day of camp.**

Personal Check #

Signature: \_\_\_\_\_

By signing here you authorize the deposit to be paid upon receipt of registration form. You will be responsible for balance due, before each camp session.

**Please Complete registration paperwork and mail with deposit to-Kelsey Hubert 3354 Royal Ave. Simi Valley, CA 93063**

## **Release of Liability- Day Camp**

I do for myself, my heirs, executors, administrators and assigns fully and forever release and discharge the property owners, employees and managers of the following locations listed below. I will hold the following parties harmless for all known and unknown, foreseen or unforeseen bodily and personal injuries, property damage and consequences therefore which I may sustain or cause by any reason of riding, handling or being in the vicinity of the following locations listed below. I do further agree to indemnify and hold harmless the same following parties against all claims, liabilities, loss, death, damages, dismemberment, actions, or causes of action.

By signing this contract you agree to the liability terms above and will hold all involved parties harmless during the time my child or children attend Day Camp or Lessons.

### **Please initial each of the following-**

\_\_\_\_\_ Oakridge Riding Club, Instructors- Kelsey Hubert & Staff

\_\_\_\_\_ Classic Equestrian Center, CEC Management and 2182 Tierra Rejada JV

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**Signature of Minor's Parent**

**Date**

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**Print Name, Address and Phone Number**

**Rider's Name & D.O.B-**

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