

# *Equitate LLC*

## **CAMP REGISTRATION FORM**

### **For August 3<sup>rd</sup>-7<sup>th</sup>, 2011**

Name \_\_\_\_\_ Age \_\_\_\_\_ Boy \_\_\_\_\_ Girl \_\_\_\_\_

Parents' or Guardians'  
names \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phones: Home \_\_\_\_\_ Work: \_\_\_\_\_

Email: \_\_\_\_\_

Cell Phone(s): \_\_\_\_\_

Can we send your confirmation via email vs. a hard copy letter? Yes \_\_\_ No \_\_\_

Nearest relative or alternate person to contact in case of an  
emergency \_\_\_\_\_

Their phone # \_\_\_\_\_

**Important:** Please list any known handicap or allergies that your child may have or anything we should know about your child in order to make his or her camp experience an enjoyable one:

\_\_\_\_\_  
\_\_\_\_\_

This camp session will begin on Wednesday morning approximately 9:00am and end on Sunday after we arrive home from the horse show (late afternoon). Exact times will be specified in your Confirmation Letter. Please allow time to complete your registration prior to the start of camp. Also, if you are coming from out of town or need to make any special arrangements for your camper, please call us ahead of time so we can accommodate your needs.

Your Confirmation Letter will include a list of items to bring and a detailed agenda. This will be sent to you 1-2 weeks prior to camp.

**Please return this form & \$400.00 non-refundable deposit, made payable to Equitate LLC. Send to: Sheri Brandl, 671 Summer Creek Rd., Oconomowoc, WI 53066. The remainder of the camp fee is due upon arrival at camp.**

\*Camp will be filled on a FIRST COME, FIRST SERVE basis, so sign up early.  
**SEE YOU SOON!**

**REMEMBER to sign the next page of this form → → →**

## WAIVER AND RELEASE FROM LIABILITY

This Waiver and Release from Liability is executed by  
**(RIDER:)** \_\_\_\_\_ hereinafter designated RIDER  
and if rider is a minor, this Waiver is executed by RIDER's parent or  
guardian(s) and the term RIDER as used herein shall also refer to parent or  
guardian(s), as applicable, and that this Waiver and Release from Liability is  
executed by RIDER in favor of Equitate LLC, Maefield Farm LLC, Sheri Brandl  
and Steve Novak, hereinafter collectively designated STABLE.

**RIDER'S PARENT/GUARDIAN(s) if Rider is under  
18:** \_\_\_\_\_ and \_\_\_\_\_.

The Undersigned hereby states, asserts, waives, releases and agrees as follows:

1. That RIDER for myself and on behalf of my child or legal ward, if applicable, hereby voluntarily request to participate in riding instruction as a student at STABLE, and that student will either ride his or her own horse, or school horses provided by STABLE for instructional purposes.
2. That RIDER understands that horses are unpredictable by nature; that when frightened or angry or under stress, a horse's natural instincts are to jump forward or sideways, to run away from danger at a trot or gallop, to kick, to buck, to rear up in front, or to bite; that horses are extremely powerful; and that if a rider falls to the ground, the fall distance will be generally from 3 ½ feet assume these risks & dangers.
3. The following Wisconsin statute is noted & understood:  
**Notice: A person who is engaged for compensation in the rental of equines or equine equipment or tack or in instruction of a person in the riding or driving of an equine or in being a passenger upon an equine is not liable for the injury or death of a person involved in equine activities resulting from the inherent risks of equine activities, as defined in section 895.481 (1) (e) of the Wisconsin statutes.**
4. That it is the responsibility of the RIDER to carry full and complete coverage on his horse, personal property and himself.
5. That RIDER has been advised that students should purchase and wear a helmet and to wear it around the stable so as to prevent horse related injuries.
6. That RIDER agrees to assume any and all risks involved in or arising from instruction by STABLE or use of STABLE'S property or services, including but not limited to, the risks of death, bodily injury, property damage, falls, kicks, bites, collisions with vehicles, horses or stationary objects, or the negligence or deliberate or other act of another person of any kind.
7. That RIDER hereby releases and discharges to the fullest extent permitted by law STABLE and its successors, assigns and agents from any liability to RIDER, and his heirs, estate and assigns from any claims, demands, damages, actions or suits of any kind and indemnifies and holds STABLE harmless from any claims, demands, damages, actions or suits, of any kind, resulting from RIDER'S riding of horses on Stables property or use of STABLE'S property or services or from instruction by STABLE.

8. That RIDER agrees to abide by all stable or instructor's rules and regulations, including but not limited to the constant use of protective headgear, shoes or boots with 1 inch heels (minimum) and hard soles.
9. That if RIDER is using his horse, the horse shall be free from infection, contagious or transmissible disease.
10. RIDER understands that they are releasing and indemnifying STABLE, it's successor's, assigns, employees, agents and or trainers from liability for any negligence of STABLE, it's successors, assigns, employees, agents and or trainers.

**RIDER or RIDER'S parent or guardian has read and understands all terms as explained above.**

\_\_\_\_\_ Date \_\_\_\_\_  
**RIDER or PARENT/GUARDIAN SIGNATURE if Rider is under 18**

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### **HELMET WAIVER**

It has been statistically shown that there are certain inherent dangers associated with horseback riding. One of those dangers is the risk of suffering serious head injuries should the rider fall or be thrown from his/her horse. It is therefore the policy of Equitate LLC, Maefield Farm LLC, Sheri Brandl and Steve Novak that safety riding helmets will be worn at all times when riders are mounted on a horse.

I, \_\_\_\_\_, being fully aware of that policy and the reasons for it, choose, of my own free will, not to wear a safety riding helmet. In taking this action, I hold Equitate LLC, Maefield Farm LLC, Sheri Brandl and Steve Novak, their insurer, free of any and all liabilities for injuries that I may receive as a result of my actions and failure to wear a safety riding helmet.

\_\_\_\_\_ Date \_\_\_\_\_  
**RIDER or PARENT/GUARDIAN SIGNATURE if Rider under 18**