

2022 Horse Camp Registration Form

12889 Parker Ave., Pine, CO 80470
www.CentaurRising.org/page/horse_camps.html
kris@anchoragefarm.com 303 847-9862 Kris' cell/text



Camper's Name: _____
 Street Address: _____
 City, State, Zip: _____
 Home Phone: _____
 Birth Date: _____ School: _____
 Mother's Name: _____ Day Phone: _____
 Father's Name: _____ Day Phone: _____
 E-mail Address: _____

If the person responsible for payment is not above or if his/her address is different, please check here and clarify on the back of this form.

Deposit enclosed \$ _____ cash check bank card
 Venmo PayPal

Use kris@anchoragefarm.com as the recipient for PayPal and @Centaur-Rising for Venmo.

Credit Card#: _____

Expiration: _____ Security Code: _____

Name of Card Holder: _____

Signature: _____

Do you authorize us to use this card to pay the balance due on the first day of camp? yes no

Circle the rate to the right of the session(s) you wish to attend. Return a \$100 deposit for each week selected. LKC = Little Kids' Camp

The registration deadline is two weeks before the first day of camp. There is a \$20 late fee for registrations received after the registration deadline.

	<u>LKC</u> half day AM PM	<u>LKC</u> all day	<u>Basic</u>	<u>Intensive</u>
June 14-16	\$250	\$450	\$350	\$475
June 21-23	\$250	\$450	\$350	\$475
July 5-7	\$250	\$450	\$350	\$475
July 12-14	\$250	\$450	\$350	\$475
August 2-4	\$250	\$450	\$350	\$475
August 9-11	\$250	\$450	\$350	\$475

Please plan for your camper to be here from 9:00 am to 3:00 pm each day. With the exception of Little Kids' Camp, supervision can also be made available from 7-9am and/or from 3-6pm for those who circle "AM" or "PM" to the right below. Please add \$15 for each AM and each PM circled.

What time can we expect you to bring your child in the morning? _____
 What time can we expect you to pick your child up in the evening? _____
 Are you in a position to help neighboring campers get to/from camp? yes no

	<u>Extended Care Needed</u>		
Tues	AM	PM	
Wed	AM	PM	
Thurs	AM	PM	

What else do we need to know to make your child's experience a most rewarding one? _____

Medical: Known allergies or medical conditions we should be aware of: _____

I authorize Centaur Rising to arrange for emergency medical transport and treatment for my child should the need arise. yes no
 I give my permission to have photographs, drawings or videos of my child participating in camp to be used for promotional purposes
 child not identified by name yes no

Payment: The enrollment deposit for all camps and all campers is \$100 per session of camp. The balance is due on the 1st day of camp.

Refunds: No cash refunds will be made in the event of cancellation for any reason. You may be able to transfer your credits to another week, to another person or to traditional riding lessons if we are notified of your change in plans prior to the deposit due date specified above or if the cancellation is of an emergency nature. Any child who, after a parent conference, continues to be unwilling or unable to comply with the rules of the camp will not be allowed to continue. No refund will be given.

Warning: Please be advised that horses are subject to unpredictable acts. They may startle, buck, rear, kick, bite or run away. You are cautioned that the riding of horses is potentially dangerous. Boots with heels and ATSM-approved riding helmets are recommended to help you minimize the risk of serious injury. Riding helmets are required for anyone under the age of 18. We strongly advise the purchase of your own equestrian helmet and that it be properly fitted for you. We cannot be held responsible for the performance of any helmet, particularly one that is not your own. Please understand that you are undertaking this activity at your own risk and that, under Colorado law, an equine professional is not liable for an injury to or the death of a participant in equine activities - due to the inherent risks of such activities (CR 5 1 3-21-120). **I have read the above and understand the conditions under which my child is enrolled in this program.**

Parent's signature →

Date:

Please return this form with your deposit to the address above by the deposit due date. Thank you!!

1/18/22