

SADDLEWOOD CAMP

2018 REGISTRATION

749 Bethany Hills Rd.,
 Bethany, ON LOA 1A0
 Phone: (705) 277-2029 Fax: (705) 277-9335
 e-mail: 749saddlewood@gmail.com

CAMP PERIOD FOR WHICH APPLICATION IS BEING MADE

(Please mark X on the line opposite desired session)

1st Session July 1 – July 14 _____
 2nd Session July 15 – July 28 _____
 3rd Session July 29 – August 11 _____
 4th Session August 12 – August 25 _____

PLEASE PRINT CLEARLY

(Use a separate application for each camper)

CAMPER'S NAME: _____ (Is your birthday while at camp?) _____

PARENTS/GUARDIANS NAMES: _____ TAX RECEIPT SENT TO
 (Mother) (Father) (Both)

ADDRESS _____
 (number, street, R.R.#) (City/Town) (Postal Code)

PHONE: _____
 (Home #) (Father's Cell #) (Mother's Cell #)

E-MAIL address: _____ ALLERGIES: _____

BIRTH DATE _____ AGE AS OF JULY 1st _____ ONT. HEALTH CARD # _____
 (Mo/Day/Year) 2018

HEIGHT _____ WEIGHT: _____ (Any Camper over 190 pounds in weight will not be allowed to jump)

PERSON TO NOTIFY IF PARENTS / GUARDIANS CANNOT BE REACHED

(Name) _____ (Phone) _____ (Relationship) _____

CAMP FEES

\$ 2200.00 (1 session)	\$ 4000.00 (2 sessions)	\$ 5500.00 (3 sessions)	\$ 7000.00 (4 sessions)
286.00 HST 13%	520.00 HST 13%	715.00 HST 13%	910.00 HST 13%
\$ 2486.00 Total	\$ 4520.00 Total	\$ 6215.00 Total	\$ 7910.00 Total

WAIVER. RELEASE, SURRENDER AND INDEMNITY

In consideration of the undersigned being permitted to attend at and/or in anyway take part in the recreational and leisure activities at "Saddlewood Equestrian Centre Inc." and "1439180 Ontario Inc." and/or to board horse (s), without paying therefore, at "Saddlewood Equestrian Centre Inc." and "1439180 Ontario Inc." the said child, my and her executors, administrators, successors, legal representatives and assigns (collectively called the "Grantors"), do hereby remise, release and forever discharge, waive, surrender and agree to save harmless protect and keep indemnified SADDLEWOOD EQUESTRIAN CENTRE INC and 1439180 ONTARIO INC., their respective agents, servants ,employees, independent contractors, and representatives (collectively referred to as "Saddlewood") from and against all injury to the "Parties who have herein executed this waiver" or any of them or of the injury, loss or damage to the property of the "Parties who have herein executed this waiver" or any of them howsoever caused arising out of or in connection with my or our being permitted to attend and/or in any way take part in the said recreational and leisure activities at or about "Saddlewood Equestrian Centre Inc." and "1439180 Ontario Inc." whether as a spectator, participant or otherwise, notwithstanding that the same may have been contributed to or occasioned by the negligence of "Saddlewood Equestrian Centre Inc." and 1439180 Ontario Inc.". I/We hereby individually and as parent(s) and/or guardian(s) of the **child named** _____ acknowledge that I/We have read, fully understand and agree to this waiver, release, surrender and indemnity. Enclosed find my cheque in the amount of **\$400.00** to apply to camp fees. I understand that full application fee (less \$50.00 administration fee) will be returned if withdrawal is made on or before April 30th 2017. The full application fee will be returned in the event that the application is not accepted. I agree to pay the balance of camp fees on or before **April 30, 2018. REFUNDS WILL NOT BE MADE FOR CANCELLATIONS AFTER APRIL 30TH, 2018.** No reduction of camp fees is allowed for campers arriving late, or leaving early in the period for which they are registered. From time to time photos/videos are taken at Saddlewood and I give my permission for my daughter's likeness to be reproduced for promotional purposes.

Signature of Parent or Guardian _____

DATE _____

What level in swimming have you completed? _____

Are you coming to Saddlewood with a friend? Yes ___ No ___ Who? _____

Have you ever been to over-night camp before? Yes ___ No ___ If yes, where _____

Have you ever been to Saddlewood before? Yes ___ No ___ If yes, which horse or pony did you ride? _____

What colour group were you in? _____ Are you bringing a horse or pony to camp with you? Yes ___ No ___

Have you been riding all year? Yes ___ No ___ If yes, where _____

- I am a beginner rider (ridden less than 10 times)
- I ride in the summer and at camps only and I am comfortable (circle applicable) walking, trotting, cross-rails, cantering,
- I am comfortable trotting cross-rails.
- I can canter a cross-rail and a vertical.
- I can canter a course of jumps including verticals and oxers.
- I show _____

How did you hear about Saddlewood? Friends OCA Internet Stable Tack Shop Repeat Camper

HAVE YOU INCLUDED THE FOLLOWING WITH THIS APPLICATION?

- COMPLETED BOTH SIDES OF THE APPLICATION
- SIGNED AND DATED THE APPLICATION FORM
- INCLUDED PHOTOCOPY OF CAMPER'S ONTARIO HEALTH CARD
- INCLUDED THE DEPOSIT FEE OF \$400.00
- INCLUDED A POST DATED CHEQUE DATED APRIL 30, 2017 FOR THE BALANCE OF FEES
- I PREFER TO PAY THE CAMP FEES BY CREDIT CARD Yes ___ No ___
- I PREFER TO PAY THE CAMP FEES BY E-TRANSFER Yes ___ No ___

PAYMENT OF CAMP FEES

Saddlewood prefers that camp fees are paid by CHEQUE (made out to SADDLEWOOD RIDING CAMP) or E-TRANSFER at the following address, jjis@saddlewood.ca Please use your daughter's first name as spelled on her application as your security question. We are also able to accept payment by credit card. Please complete the information below if you wish to pay the camp fees by credit card.

CARD NUMBER _____ EXPIRY DATE _____

CARD TYPE VISA MASTERCARD

CARD HOLDER'S NAME (please print) _____

CARD HOLDER'S SIGNATURE _____ DATE _____

For Office Use Confirmation Sent _____ Date _____

Deposit Received _____ Date _____

Balance Received _____ Date _____