Starbuck Equestrian

20 Mopus Bridge Road Ridgefield, CT 06877 (203) 438-7749 website: **starbuckequestrian.com** email: **starbuckeq@live.com**

2015 SUMMER HORSEMANSHIP PROGRAM

TWO-WEEK SESSIONS AVAILABLE \$850 (Must Be Consecutive Weeks)

ONE WEEK SESSION \$500

Monday through Friday, 9:00 a.m. to 2:00 p.m. (Circle date requested)

 $\begin{array}{ccc} June \ 15^{th} - June \ 26^{th} & June \ 29^{th} - July \ 10^{th} & July \ 13^{th} - July \ 24^{th} \\ July \ 27^{th} - August \ 7^{th} & August \ 10^{th} - August \ 21^{st} \end{array}$

Daily Program Activities include:

Horseback Riding, Stable Management, Grooming, Horse Anatomy, Tack Care, and Arts & Crafts

Cost: \$850 per two-week session. A \$500 non-refundable deposit is required to hold a spot with the balance due of \$350 on the first day of camp. The one week session is \$500 and is due with this form. Riding class sizes are limited to four to six students per two-week session, All campers should bring their own lunch, a water bottle, a towel, and **labeled** riding gear (hat, boots, and crop,) and wear a bathing suit under their riding clothes. Please register early as Starbuck Equestrian summer camp program is extremely popular.

Last Name:	First Name:		
Address:	Age_	Riding Ability:	
City:	State:	Zip:	
Home Phone:	Work Phone:		

Email address_____

WAIVER OF FARM LIABILITY

I recognize that this activity involves risk of injury and that because of the nature of this activity an injury might occur. In the event of an injury to myself or to a family member, I give permission to the attending physician to render any treatment he deems necessary, and I agree to pay for such treatment. I agree to release Stepping Stone Farm, Inc./Starbuck Equestrian LLC, its affiliates, employees, and instructors from any and all liability related to any injury I have sustained or may later sustain while engaging in this activity. I agree to hold Stepping Stone Farm, Inc./Starbuck Equestrian LLC, its affiliates, employees, and instructors, harmless from any claim, cost, or expense related to any injury I have sustained or may later sustain while engaging in this activity. I acknowledge that I have read this statement, fully understand it, and sign voluntarily.

SIGNED:

__ Date:__

Please make all checks payable to Starbuck Equestrian