



**Partridge Acres**

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[www.partridgeacres.com](http://www.partridgeacres.com)

**March Break Camp 2018**  
**~ Registration Form ~**

March 12<sup>th</sup>-14<sup>th</sup>, 9:30-3:30pm daily, extended hours 8:30-4:30pm  
\$190 plus HST for 3 days or \$65 per day plus HST  
Extended hours: \$15 for 3 days plus HST or \$5 per day plus HST

Please circle which day/s your child will attend camp    M    T    W

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Parents' Names: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Telephone #: \_\_\_\_\_

Daytime Contact #: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Emergency Contact (Name and Relation): \_\_\_\_\_

Emergency Contact Telephone #: \_\_\_\_\_

1/ Has your child been to Partridge Acres for Lessons? \_\_\_\_\_

2/ If not, how much riding experience does he/she have?

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3/Do you wish for your child to arrive/remain at Partridge Acres outside of camp hours? (I.e. early drop-off time or late pick-up time)- please state which day/s

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4/ Are there any allergies, health or medical conditions of which we should be aware?

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5/ What is the child's Health Card Number?

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Additional Camp Information:

Full payment is due at the time of registration to secure your spot.

Please fill out the Waiver and hand in along with registration.

\*\*Registrations are accepted on a first come first serve basis and space is limited- Sign up early to reserve your spot\*\*

Please provide a pair of hard-soled shoes or boots with a small and definite heel for your child to wear during all riding activities.

An ASTM safety-approved helmet is available to borrow from Partridge Acres (if your child has their own riding helmet they are encouraged to bring it).

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Signature of Parent

**ACKNOWLEDGMENT of RISK and RELEASE of LIABILITY — "For Participants Not 18 Years Old" ("Minor")**

Minor Participant's Name: \_\_\_\_\_ Date of Birth:     /     /  
Minor's Address: \_\_\_\_\_ City:             Prov:             Postal Code: \_\_\_\_\_  
Guardian's Name: \_\_\_\_\_ Date of Birth:     /     /  
Guardian's Address: \_\_\_\_\_ City:             Prov.:             Postal Code: \_\_\_\_\_

***The Guardian must Read and Understand prior to the Minor Participating in Equine Activities***

To: **Partridge Acres** their directors, employees, officers,  
(Name of Person, Organization or Company providing the Equine Activities)  
volunteers, business operators and site proper owners. (all of them collectively called the HOST)

**Initial each item below After Reading and Understanding the item**

\_\_\_\_\_ **1. I am the Parent and/or legal Guardian of the Minor Participant** named above and am executing this form on behalf of the Minor Participant in my capacity as parent and/or guardian and with **the intent that this form be binding on myself and Minor Participant for all legal purposes.**

\_\_\_\_\_ **2. I Understand** there are Inherent **DANGERS, HAZARDS and RISKS**, (collectively called **RISKS**) associated with Equine Activities and injuries resulting from these "**RISKS**" are a common occurrence.

\_\_\_\_\_ **3. I Acknowledge** that the Inherent "**RISKS**" of Equine Activities mean those **DANGEROUS** conditions which are an integral part of Equine Actives, **including but not limited to:**

- The propensity of any equine to behave in ways that might result in injury, harm or death to persons on or around them and to potentially collide with, bite or kick other animals, people, or objects.
- The unpredictability of an equine's reaction to such things as sounds, sudden movement, tremors, vibrations, unfamiliar objects, persons or other animals and hazards such as subsurface objects.
- The potential for other participant (s) to act in a negligent manner that might contribute to injury to themselves or others, such as failing to act within their ability or to maintain control over an equine.

\_\_\_\_\_ **4. I Freely Accept and Fully Assume All Responsibility** for the Inherent "**RISKS**" and the possibility of personal injury, death, property damage or loss which might result from the minor being a Participant.

\_\_\_\_\_ **5. I Acknowledge** that it remains my **Sole Responsibility** for the safety of the minor Participant and for the minor to Participate within his/her own limits.

\_\_\_\_\_ **6. In addition to consideration given for the minor to Participate in Equine Activity, I and my heirs, executors, administrators and assigns (collectively called my "Legal Representatives") agree**

- **To waive all Claims that I or the minor Participant might have against the "Host";** and
- **To Release the "HOST" from Any and All Liability** for any loss, damages, injury, or expense that I, the minor Participant or our "Legal Representatives" might suffer as a result of the minor's Participation due to any cause **including any NEGLIGENCE ON THE PART OF THE "HOST";** and
- **To HOLD HARMLESS AND INDEMNIFY THE "HOST"** from any and all liability for property damage or personal injury to the minor Participant or to any third party which might result from the minor's Participation.

Before signing this form I read it (as indicated by my initials above) and I stated that I understand it. I further state I am aware that signing this form, waives certain legal rights I and/or the minor Participant and/or our "Legal Representative" might have against he "HOST".

SIGNED This                     day of                                     20

\_\_\_\_\_  
(Print Name of HOST Witness to signing & Initialling)

\_\_\_\_\_  
(Signature of Host Witness)

\_\_\_\_\_  
(Signature of Parent/Guardian)

***Do Not Sign until you Understand All Items Above***