

THOMAS SCHOOL OF HORSEMANSHIP
 250 Round Swamp Rd. Melville, NY 11747
Summer Day Camp Application- 2018
 2018 Tuition Fees

Sessions Dates

Full 7 Weeks
 Mon. July 2nd – Fri. Aug. 17th

1st 4 Weeks
 Mon. July 2nd – Fri. July 27th

Last 3 Weeks
 Mon. July 30th – Fri. Aug. 17th

Any 6 Weeks
 Pick any Mon- Fri Weeks

Any 5 Weeks
 Pick any Mon- Fri Weeks

2 Weeks
 Mon. July 2nd – July 13th or
 July 30th – August 10th

Full 7 Weeks \$6995

Any 6 Weeks \$6350

Any 5 Weeks \$5800

First 4 Weeks \$4625

Last 3 Weeks \$3465

2 Weeks Sessions \$2300
 (requires Meet the Bus or Own Transportation)

Optional Programs

Equine Studies/ Extra Ride.....\$180/Week

Camp will be closed on July 4th in observance of Independence Day

Discounts Available

Siblings \$200

Meet the bus- 7 Weeks \$300

Meet the bus- 5 or 6 Weeks \$250

Meet the bus- 4 or 3 Weeks \$200

Addresses outside of a 20- mile radius from camp are required to meet the bus. Discounts will not apply.

Own Transportation- 7 Weeks \$500

Own Transportation- 5 or 6 Weeks \$400

Own Transportation- 4 or 3 Weeks \$250

Paid in Full by Feb. 14th 2018- %5 off Tuition

Tuitions for 3 & 4 olds on the back.
 Same discounts apply.

Family Last Name:	Boy or Girl	Birth Date	Age-June 2018	Grade-Sept 2018	Ride Level (see abbrev below)	Choose session: Full 7 Weeks Any 5 or 6 weeks First 4 Weeks Last 3 Weeks 2 Weeks	Circle Weeks Attending: 1, 2, 3, 4, 5, 6, 7	Early Starters (3 & 4 yr olds) 5 Full Days 3 Full Days 5 Half Days (Circle One)	T-Shirt Size
Child's Last Name if different:									
Child(ren) First Names:									
1st-									
2nd-									
3rd-									

RIDING LEVEL: Beginner (B) - Individual Trot (WTI) - Group Trot (WTG)
 Beg. Canter (WT/C) - Group Canter (WTC) - Beg. Jump (WTC/J) –
 Jump Crossrail Courses – (JXC) Jump Courses-(JC _____) height

Size for 2 Free T-shirts : Youth: Y Sm Y Med YLg
 Adult sizes: A Sm A Med A Lg

Child's Home Address: _____
 STREET TOWN STATE ZIP

Father Full Name _____ Mother Full Name _____
 Father Home Phone _____ Mother Home Phone _____
 Father Business Phone: _____ Mother Business Phone _____
 Father Cell Phone: _____ Mother Cell Phone: _____
 Father Business/Employer _____ Mother Business/ Employer _____
Father's Email _____ **Mother's Email** _____

Bill to: (if different): Name & Address _____

Do you want a second set of mailings to go to this address? (Yes or No)

To be used only if we are unable to reach either parent:

Emergency Contact: Name _____ Relationship _____ Ph# _____

Transportation requested: Circle one: Door to Door Will provide own transportation Agree to meet bus at: _____

Year began at TSH: _____ **School attending** _____ **Camp attended 2017** _____

Friends you would like to be with this summer: 1) _____ 2) _____ 3) _____

Does your child receive any services in school (such as SEIT, SLP, OT, PT?: _____

Any behavioral or social concerns that we should be aware of: _____

PAYMENTS: DEPOSIT: \$600 PER CHILD WITH APPLICATION. (\$500 Deposit and \$100 Processing fee).

The balance of the tuition is due May 1st.

Extra Costs: Each child must have their own ASTM Riding Helmet and Riding Boots

CIT Trip Fee: Some of the outside trips will incur an extra fee. **Tipping:** Customary but not required.

SIGNATURES OF BOTH PARENTS ARE REQUIRED ON THE BACK OF THE APPLICATION

Office use:	Deposit Date: _____	Deposit Amount: _____	Payment Method/ Number _____
	QB Entered Date: _____	CM Entered Date: _____	By: _____

Tuitions for 3 & 4 olds

	5 Full Days Tuition		3 Full/5 Half Days Tuition
Full 7 Weeks	\$5995		\$4995
Any 6 Weeks	\$5560		\$4675
Any 5 Weeks	\$4925		\$3995
First 4 Weeks	\$3975		\$3575
Last 3 Weeks	\$2995		\$2695
2 Weeks	\$2025	Meet the bus required	\$1750

PHOTO & WEB RELEASE: We give our permission for Thomas School to use any photos of our child(ren) for any promotional materials.

We give permission to give out our address or phone number for birthday parties and play dates.

Thomas School reserves the right to cancel a child's registration due to behavior that is deemed inappropriate by the Director.

Please fill in: ACCIDENT/MEDICAL INSURANCE WE AGREE THAT: Should emergency medical treatment be required, WE and/or my own accident/medical insurance company shall pay for all such incurred expenses.

My accident/medical insurance company is _____ and my policy number is _____.

Refund Policy: Deposits and any tuition paid will be refundable only until May 1st. The \$100 processing fee is NOT refundable. For any cancellation after May 1st, the deposits are non-refundable. Once camp has begun, your tuition is non-refundable, with the exception of a medical illness. In the event that your child is absent for more than 5 consecutive days due to medical reasons, a tuition refund will be made after the 5-day deductible period. A physician's note is required in order to receive a tuition refund. **Camp reserves the right to cancel the program with full refund and without penalty by April 1st.**

Heat issues: *If the weather is over 90, management reserves the right to cancel riding lessons. - An alternative activity will be substituted.

CAMP AND RIDING INSTRUCTION AGREEMENT AND LIABILITY RELEASE

THOMAS SCHOOL OF HORSEMANSHIP SUMMER DAY CAMP, 250 Round Swamp Rd., Melville, NY, hereinafter known as "THIS SCHOOL"

PLEASE READ CAREFULLY BEFORE SIGNING

SERIOUS INJURY MAY RESULT FROM YOUR or YOUR CHILD'S PARTICIPATION IN THIS ACTIVITY.

THIS SCHOOL CANNOT GUARANTEE YOUR SAFETY.

A. REGISTRATION OF RIDERS AND AGREEMENT PURPOSE: In consideration of the payment of a fee and the signing of this agreement, I, the individual listed on the opposite side of the registration form on the opposite side, and the parents or legal guardians thereof if a minor, do hereby voluntarily request and agree participate in equine related instruction as a student of THIS SCHOOL, and that this STUDENT will either utilize his/her own horse, or school horses provided by THIS SCHOOL for instructional purpose, today and on all future dates.

B. AGREEMENT SCOPE AND TERRITORY AND DEFINITIONS: This agreement shall be legally binding upon the registered STUDENT and the parents or legal guardians thereof if a minor, my heirs, estate, assigns, including all minor children, and personal representatives; and it shall be interpreted according to the laws of New York State and Suffolk County. This agreement is intended to be valid and binding at all times now and in the future when THIS SCHOOL permits the STUDENT (directly or indirectly) to enter THIS SCHOOL's property, be on THIS SCHOOL's property, be near the horse, receive riding and/or driving and/or training instruction or guidance from its associates and/or when THE STUDENT rides and/or train and/or is near horses on or off THIS SCHOOL property. Any disputes by the rider shall be litigated in, and venue shall be in Suffolk County. This agreement is intended to be as broad and inclusive as the law permits. If any clause, phrase, or word is in conflict with state law, then that single part is null and void. The term "HORSE" herein shall refer to all equine species. The term "HORSEBACK RIDING" herein shall refer to riding or otherwise handling of horse, ponies, mules, or donkeys, whether from the ground or mounted. The terms "CAMPER" and/or "RIDER" shall herein refer to a person who rides a horse mounted or otherwise handles or comes near a horse from the ground. The term "I/WE" shall herein refer to the riding school student or parents of the registered student on the opposite side.

C. INHERENT RISKS/ASSUMPTION OF RISKS: I/WE ACKNOWLEDGE THAT: Risks, conditions and dangers are inherent in (meaning an integral part of) horse/equine/animal activities, regardless of all feasible safety measures which can be taken, and I/WE agree to assume them. The inherent risks include, but are not limited to any of the following: The propensity of an animal to behave in ways that may result in injury, harm, death, or loss to persons on or around the animal; The unpredictability of an equine's reaction to sounds, sudden movements, unfamiliar objects, persons or other animals; Hazards, including, but not limited to, surface or subsurface conditions; A collision, encounter and/or confrontation with another equine, another animal, a person or an object; The potential of an equine activity participant to act in a negligent manner that may contribute to injury, harm, death, or loss, to the participant or to other persons, including but not limited to, failing to maintain control over an equine and/or failing to act within the ability of the participant. Horses are 5 to 15 times larger, 20 to 40 times more powerful and 3 to 4 times faster than a human. If a rider falls from a horse to ground it will generally be at a distance from 3. 1/2 to 5 1/2 feet, and the impact may result in harm to the rider. Horseback riding, driving and training are activities which one much smaller, weaker predator animal (the human) tries to impose its will on, and become one unit of movement with, another much larger, stronger prey animal that has a mind of its own (the horse) and each has a limited understanding of the other. If a horse is frightened or provoked it may divert from its training and act according to its natural survival instincts which may include, but are not limited to: Stopping short; Spinning around; Changing directions and/or speed at will; Shifting its weight; Bucking; Rearing; Kicking; Biting; and/or Running from danger. I also acknowledge that these are just some of the risks and I/WE agree to assume other not mentioned above. I/WE are not relying on THIS SCHOOL to list all possible risks for me/us.

D. CONDITIONS OF NATURE WARNING, UNFAMILIAR AND SUDDEN LIGHTS, SOUNDS AND MOVEMENTS WARNING, AND INSPECTION OF PREMISES: I/WE acknowledge that THIS SCHOOL is NOT responsible for total or partial acts, occurrences, or elements of nature and/or sudden unfamiliar sights, sounds and/or sudden movements that can scare a horse, cause it to fall, or react in some other unsafe way. **SOME EXAMPLES ARE:** Thunder, lightning, rain, wind, wild and domestic animals, insects, reptiles, which may walk, run, or fly near, or bite or sting a horse or person; and irregular footing on out-of-doors groomed or wild land which is subject to constant change in condition according to weather, temperature, and natural and man-made changes in landscape. I/WE also understand that these are just some of the risks and I/WE agree to assume others not mentioned above. I/WE are not relying on THIS SCHOOL to list all possible conditions to me. I/WE have inspected THIS SCHOOL'S facilities and are satisfied that all premise conditions are reasonably safe for STUDENT's intended purpose, usage, and presence upon THIS SCHOOL'S premises.

E. SADDLE GIRTHS/NATURAL LOOSENING: I / WE UNDERSTAND THAT Saddle girths (saddle fasteners around horse's belly) may loosen during riding. STUDENTS must alert the riding instructor or attendant of any looseness so action can be taken to avoid slippage of saddle and a potential fall from the animal.

F. ASTM APPROVED PROTECTIVE HEADGEAR IS REQUIRED: I/WE AGREE: I for myself and on behalf of my child and/or legal ward have been fully warned and advise by THIS SCHOOL that protective headgear/helmet which meets or exceeds the quality standards of the SEI CERTIFIED ASTM STANDARD F 1163 Equestrian Helmet should be worn while riding and/or driving and/or being near horses and I/WE understand that the wearing of such headgear/helmet may reduce the severity of some of the wearer's head injuries and possibly prevent the wearer's death from happening as the result of a fall or other occurrences. I am not relying on THIS SCHOOL and/or its associates to provide a certified helmet for me or to check any headgear/helmet strap that may wear, or to monitor my compliance with this suggestion at any time now or in the future.

G. LIABILITY RELEASE: I/WE AGREE THAT: In consideration of THIS SCHOOL allowing myself or our child's participation in this these riding activities, under the terms set forth herein, I or WE, the parents, for ourselves and on behalf of our child(ren) and/or legal ward, heirs, administrators, personal representatives or assigns, do agree to hold harmless, release, and discharge THIS SCHOOL, its owners, agents, employees, officers, directors, representatives, assigns, members, owners of premises and trails, affiliated organizations, and Insurers, and others acting on its behalf(hereinafter, collectively referred to as "Associates"), of and from all claims, demands, causes of action and legal liability, whether the same be known or unknown, anticipated or unanticipated, due to THIS SCHOOL'S and/or ITS ASSOCIATES ordinary negligence or legal liability; and I/WE do further agree that except in the event of THIS SCHOOL'S gross negligence and/or willful and/or wanton misconduct, I/WE shall not bring any claims, demands, legal actions and causes of action, against THIS SCHOOL and ITS ASSOCIATES as stated above in this clause, for any economic and non-economic losses due to bodily injury and/or death and/or property damage, sustained by me and/or my minor child or legal ward in relation to the premises and operations of THIS SCHOOL, to include while riding, handling, driving, training, handling or otherwise being near horses owned by me or owned by THIS SCHOOL or in the care, custody and control of THIS SCHOOL, or participating in any of the school activities, whether on or off the premises of THIS SCHOOL, but not limited to being in THIS SCHOOL premises.

Students OVER 21 OR Parents or Legal Guardians must sign below after reading this entire document:

SIGNER STATEMENT OF AWARENESS

I/WE, THE UNDERSIGNED, REPRESENT THAT I/WE HAVE READ AND DO UNDERSTAND THE FOREGOING AGREEMENT, WARNINGS, LIABILITY RELEASE AND ASSUMPTION OF RISK. I/WE UNDERTAND THAT BY SIGNING THIS DOCUMENT I AM GIVING UP RIGHTS TO SUE TODAY AND IN THE FUTURE. I/WE FURTHER ATTEST THAT ALL FACTS RELATING THE RIDER'S PHYSICAL CONDITION, EXPERIENCE, & AGE ARE TRUE AND ACCURATE. I AM SIGNING THIS WHILE OF SOUND MIND AND NOT SUFFERING FROM SHOCK, OR UNDER THE INFLUENCE OF ALCOHOL, DRUGS OR INTOXICANTS.

SIGNATURE OF FATHER

DATE

SIGNATURE OF MOTHER

DATE