

**Sea Horse Farm 2010**

Rider's Name: \_\_\_\_\_

M/F: \_\_\_\_ Age: \_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

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

Permanent Home Phone: \_\_\_\_\_

Permanent Email Address: \_\_\_\_\_

Summer Address: \_\_\_\_\_  
(if different)

Summer Phone: \_\_\_\_\_

Summer Email: \_\_\_\_\_

Any allergies, disabilities or illness:  
\_\_\_\_\_  
\_\_\_\_\_

Please give a brief description of the child's experience with horses:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**Week(s) Requested to Attend** (space is limited reservation required)

- |   |   |
|---|---|
| <input type="checkbox"/> June 28 - July 1 | <input type="checkbox"/> August 2 - 5   |
| <input type="checkbox"/> July 5 - 8       | <input type="checkbox"/> August 9 - 12  |
| <input type="checkbox"/> July 12 - 15     | <input type="checkbox"/> August 16 - 19 |
| <input type="checkbox"/> July 19 - 22     | <input type="checkbox"/> August 23 - 26 |
| <input type="checkbox"/> July 26 - 29     |   |

**Program Fee is \$200 per week.** A \$100 non-refundable deposit per child per week is required with application in order to reserve you space.

**Please mail registration and check to:**

Ginna Riker  
1037 New York Avenue  
Cape May, NJ 08204

**Release:**

Date: \_\_\_\_\_

It is hereby acknowledged and understood that Horseback riding is a dangerous activity. (I) (We) the undersigned, as parents or legal guardians of \_\_\_\_\_ from this date on, hereby release and hold harmless HVR LLC and/or Sea Horse Farm LLC & their employees, from any damages that may occur as a result of any injuries sustained while taking horseback riding instruction on the property of Seahorse Farm LLC,. This shall include all losses, damages, costs and counsel fees that may occur as a result of injury, and related claims by any parties.

I understand risks are involved in horseback riding and working with horses and ponies, and by signing this agreement take full responsibility for (my) (our) child in the event of any injury.

(I) (We) have read this release, and understand it terms and sigh it voluntarily and with full knowledge of its significance.

Parent's Signature: \_\_\_\_\_

Legal Guardian's Signature: \_\_\_\_\_

Witness: \_\_\_\_\_