2025 WEEKLY SUMMER BREAK - DAY CAMP - REGISTRATION FORM

CHILD NAME	D.O.BAGE:BOY / GIRL (Circle)
ADDRESS	ZIP
PARENT NAME:	E-MAIL:
PARENT ADDRESS:	CELL PHONE #:
HEALTH ISSUES/SPECIAL NEEDS:	(must indicate NO if applicable)
In case of emergency call:	Relationship to Child:
Telephone numbers: Cell:	Home/Work:
 DESIRED CAMP DATES (Please check desired boxes below Weekly DAY CAMP, Monday–Thursday, 9:00am - 5:00pm Jun 02-Jun 05 Jun 09 – Jun 12 Jun 16 – Jun 10 Jun 30-Jul 03 Jul 07- Jul 10 Jul 14 - Jul 17 	(\$450.00 each camp) Jun 19 □ Jun 23 – Jun 2
□ Aug 04 - Aug 07	
 Early Registration - 10% discount – Early Registration Minimum of 5 participants required for each camp. If NO REFUNDS after camp registration period. Must bring lunch, Helmet (bicycle helmet is acceptable BAD WEATHER Disclaimer: Session will continue unless MUST Sign Waiver/Release forms. MUST be forth con Special Need Participants require prior approval for r RNR Stables staff reserve the right to deny and/or refut documents, unacceptable behavior, or posing a threat 	session is cancelled refunds will be granted. e), preferred drinks and water bottle. travel conditions become a hazard. No refunds! ming of any sickness or illnesses. resource allocation for safety purposes. use to accept enrollment of any participants falsifying to other participants or staff.
Groupon: Redemption Code #(6-10 Nume	Required
Direct Payment: Credit Card: (must pay processing fee)	(Please make checks payable to RNR Stables)
RELEASE & WAIVER STATEMENT: I am aware that horseback riding and other equine activities are athletic their participants. I understand that my horse(s) or I may be injured or no fault of myself or anyone else, because of the nature of the activity in the most well trained ones, are often unpredictable and are often difficu RNR reserve the right to accept or deny anyone or agency consider a de Volunteers, Staff Members, Owner's, or Family Members. BY SIGNING THIS WAIVER AND RELEASE, I UNDERSTAND THAT I AM GI	die as a result of my negligence, the negligence of others, or through which I am going to be engaged. I also understand that horses, even lt to control. I do understand that the owner and/or representatives of triment or pose a threat to RNR Stables, Property, Resources, IVING UP, (WAIVING AND RELEASING) ANY RIGHT I MIGHT HAVE TO
SUE OR MAKE A CLAIM WHICH I MIGHT HAVE OR WHICH MIGHT SUBS EMPLOYEES OVER WHOSE PROPERTY I RIDE, FOR ANY INJURIES I MIU EQUINE ACTIVITY, AND THAT I AM INDEMNIFYING AND HOLDING HAR RIDDEN BY ANOTHER WHILE SO ENGAGED, IT IS MY INTENT TO GIVE AND I DO SO KNOWINGLY AND VOLUNTARILY.	GHT SUSTAIN WHILE HORSEBACK RIDING OR PARTICIPATING IN AN RMLESS, RNR STABLES, FOR INJURING ANYONE ELSE OR ANY HORSE
WARNING: UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTIVE AND REMEDIES CO TO OR THE DEATH OF A PARTICIPANT IN FARM ANIMAL ACTIVITIES RI ACTIVITIES.	
Photo/Video Release: (Required) I hereby <i>give RN</i> <i>permission</i> for videos or images of myself or my child photo and digital camera, to be used solely for the purposes of p Twitter and TicTok for promotional material and publications, a	d, captured by RNR Stables representatives through video, posting on the RNR Stables website, Instagrem, Facebook,
(Print) Name of Parent or legal guardian	

Date

Parent or legal guardian's signature