

RNR Stables  
3114 Parkridge Drive  
Corinth Texas, 76210

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940.321.8880

## 2026 WEEKLY SUMMER BREAK - DAY CAMP - REGISTRATION FORM

CHILD NAME \_\_\_\_\_ D.O.B. \_\_\_\_\_ AGE: \_\_\_\_ (must be 8 years old) 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 (\$450.00 each camp)

☐ Jun 01-Jun 04 ☐ Jun 08 – Jun 11 ☐ Jun 15 – Jun 18 ☐ Jun 22 – Jun 25

☐ Jun 29-Jul 02 ☐ Jul 06- Jul 09 ☐ Jul 13 - Jul 16 ☐ Jul 20-Jul 23 ☐ Jul 27-Jul 30

☐ Aug 03 - Aug 06

- Must be 8 years of age or older
- Early Registration - 10% discount – Early Registration DEADLINE - 7 days prior to first day of camp.
- Minimum of 5 participants required for each camp. If session is cancelled refunds will be granted.
- NO REFUNDS after camp registration period.
- Must bring lunch, Helmet (bicycle helmet is acceptable), preferred drinks and water bottle.
- BAD WEATHER Disclaimer: Session will continue unless travel conditions become a hazard. No refunds!
- MUST Sign Waiver/Release forms. MUST be forth coming of any sickness or illnesses.
- Special Need Participants require prior approval for resource allocation for safety purposes.
- RNR Stables staff reserve the right to deny and/or refuse to accept enrollment of any participants falsifying documents, unacceptable behavior, or posing a threat to other participants or staff.

☐ Groupon: Redemption Code # \_\_\_\_\_ *Required*  
( 6 - 10 Numeric Code )

☐ Direct Payment: ☐ Credit Card: \_\_\_\_\_ ☐ Check: \_\_\_\_\_ ☐ Cash: \_\_\_\_\_  
(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 events which pose potentially serious risks of injuries or death to their participants. I understand that my horse(s) or I may be injured or die as a result of my negligence, the negligence of others, or through no fault of myself or anyone else, because of the nature of the activity in which I am going to be engaged. I also understand that horses, even the most well trained ones, are often unpredictable and are often difficult to control. I do understand that the owner and/or representatives of RNR reserve the right to accept or deny anyone or agency consider a detriment or pose a threat to RNR Stables, Property, Resources, Volunteers, Staff Members, Owner's, or Family Members.

BY SIGNING THIS WAIVER AND RELEASE, I UNDERSTAND THAT I AM GIVING UP, (WAIVING AND RELEASING) ANY RIGHT I MIGHT HAVE TO SUE OR MAKE A CLAIM WHICH I MIGHT HAVE OR WHICH MIGHT SUBSEQUENTLY ARISE OR OCCUR AGAINST RNR STABLES, OR EMPLOYEES OVER WHOSE PROPERTY I RIDE, FOR ANY INJURIES I MIGHT SUSTAIN WHILE HORSEBACK RIDING OR PARTICIPATING IN AN EQUINE ACTIVITY, AND THAT I AM INDEMNIFYING AND HOLDING HARMLESS, RNR STABLES, FOR INJURING ANYONE ELSE OR ANY HORSE RIDDEN BY ANOTHER WHILE SO ENGAGED, IT IS MY INTENT TO GIVE UP THOSE RIGHTS AND PROVIDE THE HOLD HARMLESS AGREEMENT, AND I DO SO KNOWINGLY AND VOLUNTARILY.

#### WARNING:

UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE AND REMEDIES CODE), A FARM ANIMAL PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN FARM ANIMAL ACTIVITIES RESULTING FROM THE INHERENT RISKS OF FARM ANIMAL ACTIVITIES.

**Photo/Video Release:** (Required) I hereby give RNR Stables permission ☐ or, DO NOT give permission ☐ for videos or images of myself or my child, captured by RNR Stables representatives through video,

photo and digital camera, to be used solely for the purposes of posting on the RNR Stables website, Instagram, Facebook, Twitter and TikTok for promotional material and publications, and waive any rights of compensation or ownership thereto.

(Print) Name of Parent or legal guardian \_\_\_\_\_

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Parent or legal guardian's signature

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Date