

Keezlenutten Farm



Keezlenutten Farm, LLC

3442 Keezlenutten Lane

Keezletown, VA 22832

(540) 269-2227

Your child is invited to join Advanced Beginner horse camp week: July 13-17 or July 27-31. There are also two weeks of full day camp available, if these do not work for your family. Campers need to arrive at Keezlenutten Farm by 8:00 am and be picked up by 3:30 pm. The cost of camp is \$425.00 per student. Each week will have a maximum of 12 students, availability on a first come, first served basis held by a \$100.00 deposit. We will also be offering one week of half day camp for children ages 6-10. If you or someone you know is interested in receiving more information about these camps, please contact me.

The schedule during the week will be as follows:

8:00 – 9:00	Bring in and feed horses
9:00 – 11:00	Riding lesson (students will be broken up into groups based on their skill level)
11:00 - 11:30	Untack and groom horses
11:30 – 12:00	Lunch (pack your own)
12:00 – 1:00	Learning project of the day or craft
1:00 – 3:00	Second riding lesson
3:00 - 3:30	Untack and turn out horses

On Friday everyone is invited to watch an exhibition starting at 2pm.

During their stay, students will review the following:

- Basic farrier work
- Cleaning stalls (the campers' favorite part!!)
- Health and medical care
- Cleaning tack
- Conformation
- Costs of owning and caring for a horse
- Grooming
- Feeding

Please call me if you have any questions regarding camp, 540-290-3731. I look forward to seeing everyone there!

Please return all enclosed forms to Danielle Geisert, 3226 Caverns Drive, Keezletown, VA 22832



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Rider's Name _____ Birthdate _____ Height _____ Weight _____

Please mark your preference for an Advanced Beginner camp week:

_____ July 13 - 17 _____ July 27 - 31

If you are unable to participate in either of these weeks, but would like to attend another camp, please mark your 1st and 2nd choices for the other weeks:

_____ July 6 - 10 _____ July 20 - 24

Parent/Guardian _____ Phone _____ Cell _____

Address _____ City _____ Zip _____

Email _____

Emergency Contact person, other than parent:

Name _____ Phone _____ Relation to student _____

Physician's Name _____ Phone _____

Preferred Medical Facility _____ Date of last tetanus shot _____

Describe ANY medical condition (including allergies) requiring special precautions or treatment and any medications and dosage. None

Otherwise, please describe: _____

In case of medical emergency, the undersigned authorizes an agent of Keezlenutten Farm, LLC to provide or arrange for medical assistance as they determine necessary, at your cost. The undersigned authorizes any licensed physician and/or hospitalization for the rider, including anesthetic, which they determine necessary or advisable.

No person can be accepted for riding instruction until this form has been completed by the parent or guardian. If the person is of legal age (18), he/she may complete the form. Riding instruction will be under strict supervision, and although every effort will be made to avoid any accident, NO LIABILITY can be accepted by Keezlenutten Farm, LLC.

There will be no refunds made for a camper leaving during the session for which he or she has registered. If a camper cannot attend a camp, all monies paid, minus the \$100 deposit, will be refunded, if they cancel at least 2 weeks prior to the start of camp. A camper who exhibits emotional, psychological, or behavioral conditions which are harmful to themselves or others will be dismissed with no refund of fee.

I HAVE READ THIS ENTIRE RELEASE AND AGREE TO IT.

PARENT/GUARDIAN SIGNATURE _____ DATE _____



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PHOTO RELEASE FORM

For valuable consideration given and which is hereby acknowledged, the undersigned hereby grant to Keezlenutten Farm, LLC permission to take or have taken, still and moving photographs and films including television pictures of _____ and consents and authorizes Keezlenutten Farm, LLC, its advertising agencies, news media, and any other persons interested in Keezlenutten Farm, LLC, and its work, to the use and reproduction of the photographs, films, and pictures to circulate and publicize the same by all means including without limit, the generality of the foregoing newspapers, television media, brochures, pamphlets, instructional materials, books and clinical material.

With regard to the foregoing material, no inducements or promises have been made to us/me to secure our/my signature(s) to this release other than the intention of Keezlenutten Farm, LLC to use or be used such photographs, films and pictures for the primary purpose of promoting and aiding its program and its work.

PARENT/GUARDIAN SIGNATURE _____ DATE _____

HORSEBACK RIDING EXPERIENCE

Has the rider:

- Walked on a horse? Yes No
- Trotted on a horse? Yes No
- Cantered on a horse? Yes No
- Taken lessons? Yes No If so, for how long? _____
- Jumped? Yes No If so, to what height? _____
- Owned their own horse? Yes No If so, for how long? _____

Are there any specific skills that the rider needs to work on, or would like to work on?
