



## **Horseback Riding 2018**

Clara Barton Camp and Camp Joslin will offer horseback riding **during all one, two and three-week sessions at both camps, but *space is limited***. Horseback riding is held at a local riding stable within walking distance from Clara Barton Camp and just a short drive from Camp Joslin. Campers at two-week sessions will receive 6 one-hour horseback riding experiences throughout their camp stay in a ring setting with an instructor and volunteers. Campers will ride outside or inside, depending on the weather. Campers at one-week sessions will receive 3 one-hour horseback riding experiences, and campers at the three-week session will receive 9 one-hour experiences. In addition to riding, campers will learn care and grooming practices as well.

The cost for horseback riding lessons at two-week sessions is \$250 per child in addition to the total camp fee. The cost for horseback riding lessons at one-week sessions is \$125, and the three-week session cost is \$375. Spaces are filled on a first-come, first-served basis. Spaces will not be reserved until full payment is received. There are only 16 spaces available per session so, if interested, we suggest that you register right away.

To reserve a space in horseback riding, please fill out all the information on this double-sided form and return the form together with a payment of \$250 for two-week sessions, \$375 for Session 1TW or \$125 for one-week sessions. Please make checks payable to The Barton Center. Please make sure to fill out the liability release on the back of this form—this liability release is **mandatory**. If the back of this form is incomplete, your child CANNOT go to or participate in horseback riding.

**In addition to the Horseback riding cost, everyone must bring their own horseback riding helmet, long pants, and shoes with a heel. These items will not be provided.**

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**Horseback riding cost: \$375 for Session 1TW (three weeks)**  
**Horseback riding cost: \$250 for Sessions 2, 3, 4 (two weeks)**  
**Horseback riding cost: \$125 for Session 1, 3a, 3b, 4a, 4b (one week)**

Camper Name: \_\_\_\_\_  
Session Attending: \_\_\_\_\_ Clara Barton Camp \_\_\_\_\_ Camp Joslin \_\_\_\_\_  
Payment: \_\_\_\_\_ Check \_\_\_\_\_ Master Card \_\_\_\_\_ Visa \_\_\_\_\_ Number: \_\_\_\_\_  
Name as it appears on card: \_\_\_\_\_ Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
CVV (3-digit Verification # on front or back of card): \_\_\_\_\_  
Signature of card holder: \_\_\_\_\_  
Parents'/Guardians' Names: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

**RETURN TO:**  
**The Barton Center for Diabetes Education, Inc.**  
**P.O. Box 356, 30 Ennis Road, North Oxford, MA 01537**  
**Tel: (508) 987-2056 [www.bartoncenter.org](http://www.bartoncenter.org)**



FOUR WINDS EQUESTRIAN CENTER  
NORTH OXFORD, MA

**FOUR WINDS FARM & FOUR WINDS EQUESTRIAN CENTER - 2018 LIABILITY RELEASE FORM**

In full and complete consideration for being granted the right to utilize the property (including any animal, livestock), facilities and equipment of **EDWARD & KATHLEEN BLASH, STEPHEN & LAURA BLASH, and JAMIE BLASH** and **Four Winds Equestrian Center** and other good and valuable consideration the receipt of which is hereby acknowledged;

I hereby acknowledge and agree that riding a horse is inherently dangerous and therefore due to the nature of the activity, **ACCIDENTS** happen. I hereby acknowledge and agree that it is the responsibility of the rider to carry full and complete insurance (if owed by rider), any personal property, and himself/herself (by parents or minor). I hereby acknowledge and agree that neither **EDWARD, KATHLEEN, STEPHEN, & LAURA BLASH, JAMIE BLASH, WENDY LEO JOHNSON, MADELINE OSTROW** (instructors and owners) nor owners of horses used by **ABOVE**: for instruction, nor their respective families, agents, employees or trustees, jointly or severally, accepts or assumes responsibility or liability for injury (including illness, owned or leased by the undersigned) due to whatever cause occurring during or as a result of such use.

\_\_\_\_\_  
NAME OF RIDER

\_\_\_\_\_  
DATE

\_\_\_\_\_  
ADDRESS (STREET, TOWN, ZIP)

\_\_\_\_\_  
PHONE (PARENT)

\_\_\_\_\_  
EMERGENCY CONTACT

\_\_\_\_\_  
PHONE

Accordingly any minor riding is under complete responsibility of their parents and/or The Barton Center staff and releases Four Winds Equestrian and their respective families, agents, employees and trustees from any and all claims of liability and agree to hold the same harmless from such claims with respect to any such injuries and/or damages.

**WARNING**

**Under Massachusetts law, an equine professional is not liable for an injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities, pursuant to section 2D of chapter 128 of the General Laws.**

\_\_\_\_\_  
PARENT NAME

\_\_\_\_\_  
EMAIL

\_\_\_\_\_  
PARENT SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
CAMP SESSION