



SUMMER CAMP 2017

Therapeutic
Riding Program

DATE: August 2nd, 3rd and 4th, 2017
TIME: 8:30 am to 1:00 pm
COST: \$250 - cash or cheque payable to CDSCL
WHERE: 849 Erickson Rd, Creston, BC

Please keep this page for your information and return pages 2, 3 and 4 to CDSCL.

Summer Camp is open to recreational riders and riders who participate in the therapeutic riding program. A maximum of 12 participants are split up into 3 groups of 4 for the daily activities. Age of participants generally range from 6 years old to 15 years old for recreational riders.

Daily activities include:

- one riding lesson
- two other horse related non-riding activities (spending time working with a horse while on the ground).

CDSCL supplies:

- ASTM-SEI certified riding helmets
- Riding boots are available in some sizes.
- Well trained, safe horses
- Canadian Therapeutic Riding Association Certified instructors.
- Water

The rider should bring the following:

- **Long pants for riding.** These can be jeans or riding pants. Shorts or capris aren't great for riding in as the legs are exposed to the saddle and the rider may develop rub sores.
- **Lunch and snacks.**
- A change of clothes (shorts and running shoes) for hot weather.

If you bring your own equipment:

- **Riding helmet:** Please make sure that it fits properly, has a chin strap and is ASTM/SEI certified. The ASTM/SEI helmets cover most of the back of the rider's head and also provides protection to specific areas of the head. Without this proper coverage, it does not pass certification. Bicycle helmets that are currently being sold only provide protection for the top of the head and are not permitted for riding horses.
- **Riding boots** can be an ankle boot or a tall boot, as long as they have a 1/2" heel and a smooth sole. Hiking boots are not recommended.



Therapeutic Riding Program

SUMMER CAMP 2017

DATE OF SESSION: August 2nd, 3rd and 4th, 2017
TIME: 8:30 am to 1:00 pm
COST: \$250

Name of Rider: _____

Age: _____ Weight: _____ Height: _____ **Please note that there is a weight limit of 180 lbs.**

Address: _____

Phone: _____ email: _____

Legal Guardian: _____

Address: _____

Phone: _____ email: _____

Tell us a bit about your horse experience: _____

Signature of Rider: _____ **Date:** _____

Signature of Legal Guardian: _____ **Date:** _____

Signature of Witness: _____

Signature of Program Director: _____ **Date:** _____

Questions? Please call Michelle at 250-402-6793 or email mwhiteaway@hotmail.com

Please returned the completed form to
The Office - 205 7th Ave North, Creston
OR By Mail - PO Box 1820, Creston, BC V0B 1G0
OR By fax: 250-428-2297
Thank you!



THERAPEUTIC RIDING PROGRAM

P.O. Box 1820 205-7th Ave. N. Creston BC, V0B 1G0 ph. (250) 402-6793 fax 428-2297

Name of Rider: _____

RIDER LIABILITY WAIVER

I acknowledge that the sport of horses is a risk sport and that I am participating at my own risk and in full knowledge of the hazards and potential hazards which are inherent in this sport. I further acknowledge the inherent risk in riding, working around horses (mounted and dismounted) and viewing horse activities, which include bodily injury to both horse and rider which can result from therapeutic riding as well as normal use, competition and schooling. It is hereby also understood that no helmet or protective equipment can protect me against all foreseeable injury.

I hereby assume all risk and hereby absolve Creston and District Society for Community Living, its members and volunteers, Kootenay Region Association for Community Living, their members and volunteers from all responsibility, liability or claims of any nature and kind which I may have arising from participation in the Therapeutic Riding Program including but not limited to bodily injury or death, and damage to or loss of my property arising from any cause whatsoever, including negligence of one or more of the organizations or individuals referred to herein.

I hereby declare that in signing this document that I have read and fully understood and agree to the terms and conditions stated herein and that it is binding upon my executors, heirs and assigns.

Signature of Rider: _____ date: _____

Signature of Legal Guardian: _____ date: _____

Signature of Witness: _____ date: _____

PHOTO/VIDEO RELEASE/NON-CONSENT

While on outings and during our daily programs many exciting situations arise. By photographing or video taping these events we can share them with you, family members, caregivers, and others and utilize them to demonstrate the "good works" for our organization. For this reason, we ask permission to share these photographs and or videotapes with the general public.

Give permission for CDSCL to:

- 1. Share photographs with the general public Yes () No ()
- 2. Share video tapes with the general public Yes () No ()
- 3. Publish photographs/videos/stories on the internet Yes () No ()

Signature of Rider: _____ date: _____

Signature of Witness: _____

Signature of Legal Guardian: _____ date: _____

Signature of Witness: _____ date: _____



EMERGENCY MEDICAL TREATMENT

Name: _____

Address: _____

Phone: _____

Emergency Contact Name: _____

Relationship: _____ Phone: _____

Care Card Number: _____

Physician Name: _____ Phone: _____

Medications: _____

Allergies: _____

Other: _____

CONSENT FOR EMERGENCY MEDICAL TREATMENT

In case of emergency, **I give permission** to Creston and District Society for Community Living to secure medical treatment including x-rays, surgery, hospitalization and medication.

Signature of Rider: _____ Date: _____

Signature of Legal Guardian: _____ Date: _____

Witness: _____

NON CONSENT FOR EMERGENCY MEDICAL TREATMENT

In case of emergency, **I do not give permission** to Creston and District Society for Community Living to secure medical treatment including x-rays, surgery, hospitalization and medication.

Signature of Rider: _____ Date: _____

Signature of Legal Guardian: _____ Date: _____

Witness: _____

THERAPEUTIC RIDING PROGRAM – SUMMER CAMP 2015!



Riding bareback blindfolded!



Group ride on Amigo!



Fun crafts with rosettes and horse shoes



Riding out on the trail



In hand obstacles are always a blast!



Peanut tries to help....



Windy and Cupcake were so patient when painted.

