

# WRA Risk Awareness Form

THIS DOCUMENT WILL AFFECT YOUR LEGAL RIGHTS AND LIABILITIES

## PLEASE READ CAREFULLY

### AGREEMENT FOR ACCEPTANCE OF RISK AND WAIVER OF LIABILITY FOR A MINOR CHILD

I REQUEST PERMISSION FOR MY CHILD, \_\_\_\_\_ TO PARTICIPATE IN HORSEBACK RIDING AND OTHER EQUESTRIAN RELATED ACTIVITIES AT OR IN WHITCHURCH RIDING ACADEMY INC..

I FULLY UNDERSTAND THAT HORSEBACK RIDING, HANDLING AND GROOMING OF HORSES AND OTHER STABLE ACTIVITIES ARE VERY DANGEROUS. I WISH TO ALLOW MY CHILD TO PARTICIPATE IN THESE ACTIVITIES KNOWING THAT THEY ARE DANGEROUS.

I ACCEPT AND ASSUME ALL RISK OF INJURY (INCLUDING DEATH) TO MY CHILD OR MY PROPERTY. I REPRESENT AND WARRANT THAT I HAVE AUTHORITY TO GIVE THIS RELEASE.

COVID-19: WHITCHURCH RIDING ACADEMY INC. AND ITS EMPLOYEES WILL NOT BE LIABLE FOR CONTRACTION OF COVID-19, OR ANY ILLNESS ARISING FROM PARTICIPATION IN THE SPORT OR ATTENDING THE FACILITY, AND THE SIGNING PARTY IS GIVING UP THEIR LEGAL RIGHT TO ANY AND ALL FUTURE CLAIMS.

IN EXCHANGE FOR MY CHILD BEING PERMITTED TO PARTICIPATE IN THESE ACTIVITIES, FOR MY CHILD, MYSELF, MY CHILD'S HEIRS, GUARDIANS, AND LEGAL REPRESENTATIVES, I RELEASE AND AGREE NOT TO MAKE ANY CLAIMS OF ANY KIND AGAINST WHITCHURCH RIDING ACADEMY INC. OR OFFICIALS, SERVANTS, EMPLOYEES, REPRESENTATIVES, OFFICERS, AND DIRECTORS FOR ANY INJURY (INCLUDING DEATH), TO MY CHILD OR ANY DAMAGE TO MY PROPERTY, ARISING OUT OF MY CHILD'S PARTICIPATION IN THESE DANGEROUS HORSEBACK RIDING OR RELATED ACTIVITIES.

I ACKNOWLEDGE AS PARENT/GUARDIAN OF \_\_\_\_\_. THAT I HAVE READ AND FULLY UNDERSTAND AND AGREE TO THE TERMS AND CONDITIONS STATED HEREIN AND THAT IT IS BINDING UPON MY EXECUTORS, HEIRS AND ASSIGNS.

IN THE EVENT OF AN EMERGENCY, I AUTHORIZE THE PHYSICIAN IN THE EMERGENCY CARE UNIT SELECTED BY THE WHITCHURCH RIDING ACADEMY INC. STAFF TO SECURE PROPER TREATMENT FOR MY CHILD.

DATED: \_\_\_\_\_ CHILD'S NAME: \_\_\_\_\_

SIGNATURE OF PARENT/GUARDIAN: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

WITNESS: \_\_\_\_\_



# Whitchurch Summer Riding Camp 2021 Registration Form (complete both sides)

Today's Date       /   /     
                                  M    D    Y

*Please submit a separate registration for each camper.*

### Camper Name

(Last) \_\_\_\_\_

(First) \_\_\_\_\_

Birthdate:    /   /         Age          M  F   
                                  M    D    Y

Are you a past Whitchurch Riding Student or Camper?    Yes  No

### Parent 1/Guardian/Primary Contact

Mr./Mrs./Ms. (Last) \_\_\_\_\_ (First) \_\_\_\_\_

Address \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

Primary Phones (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

Work Phone (\_\_\_\_\_) \_\_\_\_\_ Ext \_\_\_\_\_

E-mail: \_\_\_\_\_

### Parent 2/Secondary Contact

Mr./Mrs./Ms. (Last) \_\_\_\_\_ (First) \_\_\_\_\_

Address \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

Primary Phones (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

Work Phone (\_\_\_\_\_) \_\_\_\_\_ Ext \_\_\_\_\_

E-mail: \_\_\_\_\_

**Whitchurch Riding Camp 2021 Registration Form** ♦ Or register securely online from our website!



Camper Name: _____	Camp Fee	Helmet Rental	2 <sup>nd</sup> Lesson	Bus Stops		Total
				Bedford Park St. Gabriel	Ashton Meadows Aurora/404 Davis/404	
<input type="checkbox"/> Session 1 July 5 - July 9	5 days \$ 669 <input type="checkbox"/>	\$ 25 <input type="checkbox"/>	Included			_____
<input type="checkbox"/> Session 2 July 12 - July 16	5 days \$ 669 <input type="checkbox"/>	\$ 25 <input type="checkbox"/>	Included			_____
<input type="checkbox"/> Session 3 July 19 - July 23	5 days \$ 669 <input type="checkbox"/>	\$ 25 <input type="checkbox"/>	Included	Busing is not currently available.		_____
<input type="checkbox"/> Session 4 July 26 - July 30	5 days \$ 669 <input type="checkbox"/>	\$ 25 <input type="checkbox"/>	Included			_____
<input type="checkbox"/> *Session 5 Aug. 3 - Aug. 6	*4 days \$ 539 <input type="checkbox"/>	\$ 20 <input type="checkbox"/>	Included	Please check back in May.		_____
<input type="checkbox"/> Session 6 Aug. 9 - Aug. 13	5 days \$ 669 <input type="checkbox"/>	\$ 25 <input type="checkbox"/>	Included			_____
<input type="checkbox"/> Session 7 Aug. 16 - Aug. 20	5 days \$ 669 <input type="checkbox"/>	\$ 25 <input type="checkbox"/>	Included			_____
<input type="checkbox"/> Session 8 Aug. 23 - Aug. 27	5 days \$ 669 <input type="checkbox"/>	\$ 25 <input type="checkbox"/>	Included			_____
<input type="checkbox"/> *Session 9 Aug. 30 - Sept 2	*4 days \$ 539 <input type="checkbox"/>	\$ 20 <input type="checkbox"/>	Included			_____

\* **Note: Riding Camp is CLOSED on Mon. Aug 2 & Fri. Sept 3, 2021**

**Busing is not currently available for 2021 due to COVID-19**

If you are unable to drive direct and require busing to attend camp, please ask to be placed on our camp waiting list. No deposit is required, and we will contact you in May when a decision is made.

**Sub-total** \_\_\_\_\_

**Plus 13% HST** \_\_\_\_\_

**Medical Information**

- Does your child have any allergies? Yes  No
- Is your child under any treatment we should be aware of? Yes  No
- Any health or behavioural conditions we should be aware of? Yes  No
- Will your child be carrying any medication? Yes  No

Please elaborate or include any other notes and requests.  
\_\_\_\_\_  
\_\_\_\_\_

**HOW DID YOU HEAR ABOUT WHITCHURCH RIDING CAMP?**

- Home Show  Internet  Friends  Road sign
- Royal Winter Fair  Returning Camper/Student

**TOTAL CAMP FEES**

Deposit: \$100 /camper - Full balance is due on May 15.

**E-Transfer Amount**      \$ \_\_\_\_\_

*E-Transfer to: [wra@whitchurchriding.com](mailto:wra@whitchurchriding.com)  
Credit cards are not accepted.*

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