

MVRU HORSE CAMP

2024 Summer Registration Form

At Crown S Ranch

5-9 Year Olds

\$280

For Office Use Only	
Date Received _____	_____
Payment _____	_____

Camper Information

Child's Name _____

Name Child is known by _____

Parent(s) Name(s) _____

Date of Birth ____/____/____ Age _____

Male Female Non-Binary

Parent Phone Number 1 _____

Parent Phone Number 2 _____

Email _____

Home Address _____

I am a full-time Methow Valley Resident Yes No

Local Emergency Contact (*other than parents*)

Name _____ Phone Number _____

Any known allergies? _____

Any dietary restrictions? _____

Is there any other medical, health, or developmental information we should know concerning your child

Camp Description

Learn basic safety, horse care and horsemanship including grooming, leading, games, and riding. Get to know our amazing herd of horses and ponies and how to develop fair, enjoyable relationships with them. Enjoy magical time with high quality instruction with certified instructors and incredible horses as Crown S Ranch. Financial Aid available.

Session One
Ages 5-8
Tuesday, June 18 - Thursday, June 20
9am- 1pm
\$280

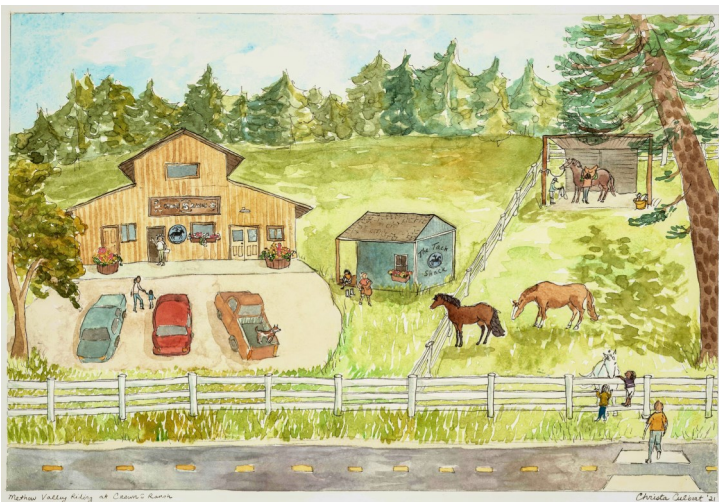
Session Two
Ages 6-9
Tuesday, June 25 - Thursday, June 27
9am- 1pm
\$280

Camp Selection

Please indicate your first and second choices for sessions. We will do our best to give everyone their first choice. To accommodate all interested, it is unlikely you will be able to attend both weeks.

MVRU Horse Camp	Select Camp
June 18-20 (Ages 5-8) 9:00am-1:00pm	
June 25-27 (Ages 6-9) 9:00am-1:00pm	

Please return full payment to Little Star to secure your spot. Checks should be made out to "Little Star School". Contact annieb@mvridding.org for information about financial aid.



Acknowledgement of Policies, Consent, and Release of Liability

I understand that if I withdraw my child from a camp, my payment will not be reimbursed unless the camp session is full and MVRU is able to fill my spot. I agree that picture taken during camp hours may be used for promotional purposes.

Signature _____

Date _____

I, the undersigned parent/guardian of this applicant, a minor, do hereby convey temporary authority to the MVRU staff (the Staff) to obtain medical, surgical, or dental examination, procedure or treatment of or for my child if, in the reasonable judgement of a licensed medical professional, the examination, procedure, or treatment is deemed necessary for the well being of my child (when not accompanied by a parent/legal guardian, or should either parent/legal guardian be unreachable by telephone). Further, I give MVRU permission to transport my child to a doctor's office, hospital, or other treatment facility for medical treatment. I hereby release any licensed health care provider providing medical care to my child from liability relating to such provider's acceptance of my substitute care giver's consent.

In addition, I hereby release and shall defend, indemnify, and hold harmless MVRU and its officers, trustees, directors, agents, successors, assigns, personnel, employees, invitees, contractors, and volunteers from every claim and any liability that I or my child may allege as a direct or indirect result of my child's participation in any program at MVRU. This release is on behalf of myself and our personal representatives, successors, assigns, executors, heirs, and next of kin for any and all claims, demands, losses, or damages of any kind or nature to my child. This consent shall remain in effect until it is revoked in writing to MVRU. This form is a contract with legal, binding consequences and it applies to all activities in which my child engages in while participating in a program at MVRU. I understand that by signing or typing my name in the space below that I understand what this form means.

Signature _____

Date _____

Registration is open to full-time Methow Valley Residents on March 11, and to the general public March 18. Please email your completed form to emilynelson@littlestarschool.org, or return it with your payment in person to the main office on the Little Star Winthrop campus or mail to PO Box 608, Winthrop, WA 98862. Please note your spot is not guaranteed until we receive payment in full or you have contacted us with a payment plan. Please call 509-996-2801 or email emilynelson@littlestarschool.org with any questions. Payment by check or cash is preferred, credit card payments are accepted but are subject to a 3.2% processing fee.

Little Star School partners with MVRU for marketing and payment collection purposes, but is in no way responsible or liable for the content, programming, and policies of MVRU camps or other programs.