



Bella Ranch Summer Camp 2024

Summer camp is from 9am to 4pm for full day, and either 9am to 1 pm OR 1 pm to 4pm for half day.

****Please call/text Olga at 713-826-5221 or email bellaranchhorsebackriding@gmail.com regarding any special scheduling issues (conflicts with pick-up/drop-off times, etc), or with questions, comments or concerns.****

Drop off is between 8:45 am – 9 am. Pick up for AM half-day is 12 pm. Pickup for all students is 4pm. A \$50 late fee will be charged. We will have a light breakfast available for students (donuts, kolaches) in the mornings. Lunch is offered to all students daily. If you have a picky eater or a child with specific allergies, we recommend packing a lunch.*** We have multiple refrigerators. Snacks will be fed throughout the day. **Gate shuts at 9:15 am, and opens at 12:45 pm to 1:15pm, and closes again til 3:45.** We try to keep the gate closed when possible for the safety of our students. **Please do not be late. We will charge a \$50 fee for late pickup past 20 minutes.**

Checklist of all required forms:

- Registration form, photo consent and questionnaire
- Minor Release/Medical Treatment Consent Form signed & notarized, Liability Release
- Camp rules signed by camper and/or parent
- Copy of medical insurance card
- Payment: To be paid at time of online registration

Completed packets may be turned in by mail or in person to: 1331 N Plum Creek Dr Spring, Texas 77386
OR by E-mail: bellaranchhorsebackriding@gmail.com.

Bella Ranch Summer Camp 2023 Registration Packet

6-15 years old (unless otherwise approved by BRHR)

1331 N Plum Creek Dr, Spring, Texas 77386

Cell (text or call) 713-826-5221 or email: bellaranchhorsebackriding@gmail.com

Camper's Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Parent/Guardian Home Phone: _____

Email: _____

Camper's Age: _____ Date of Birth: _____ Sex(circle one): M F

Parent/Legal Guardian Name: _____

Parent/Legal Guardian's Daytime Phone: _____ Work Phone: _____

People authorized for pickup: _____

Camp Tee Shirt youth size: _____

Are you taking prescription medicine? Yes No

Any special needs: _____

Allergies? Yes No If yes, please describe: _____

Bella Ranch Summer Camp Horseback Riding Questionnaire

Please fill out this questionnaire to help us prepare for your time at camp. This form is necessary so we can match horse and rider appropriately and therefore give campers a great time at camp. Thank you!

Camper's Name _____ D.O.B. _____

Height _____ Weight _____ *please note- our horses have a 150 lb. weight limit.

Riding Experience (check one)

____ Pre-Riding (never been on a horse, afraid of horses and/or may need support to sit balanced in saddle)

____ Beginner (ridden a horse less than 5 times, little to no experience)

____ Intermediate (taken more than 5 horseback riding lessons and performs basic riding skills) _____

Advanced (takes/has taken horseback riding lessons consistently, can walk/trot and perform basic riding skills, confident and comfortable when riding/working with horses).

Please describe any riding experience you have or anything we should know about your experience with horses.

Please note, all horses and ponies are assigned by the staff at their discretion. We take into consideration the age/weight/height/experience of campers to ensure a safe and enjoyable time at camp.

PHOTO CONSENT AND RELEASE

____ YES! I'll smile for the camera. Feel free to put my picture anywhere on your website, social media, printed materials or other advertising.

____ No thanks. I'm camera shy! Please do not take or post pictures of me anywhere. We're looking forward to seeing you at camp this summer at Bella Ranch!

Initials _____

Minor's Release/Medical Treatment Consent Form

Participant's Name: _____ Age: _____ DOB: _____ MINOR

RELEASE

In consideration for the above named participant in the Bella Ranch Summer Camp during the year of 2023 and other good and valuable consideration, the receipt of which is hereby acknowledged, the undersigned agrees as follows:

- 1. Pursuant to Substitute House Bill #2222, Chapter 290 in 1994 Session Laws through 60-400, there is no liability for an injury to or the death of a participant in domestic animal activities resulting from the inherent risks of domestic animal activities. You are assuming the risk of participating in this domestic animal activity.
2. Acknowledgement of Risk: The undersigned acknowledges that rodeo is a dangerous activity and that participation in horseback riding and other horse-related activities exposes the participant to a substantial and serious risk. The undersigned consents to the participant assuming such risk.
3. Release of Sponsors and Others: The undersigned, being fully aware that participating in Bella Ranch Summer Camp and related activities will expose participant to substantial and even serious risk or property damage, personal injury or death, hereby releases and forever discharges Bella Ranch and anyone acting on their behalf from any and all damages, costs, losses, claims, actions or causes of action of every kind and nature, whether past, present or future, arising out of or in any way connected with the participant's participation in or attendance at Bella Ranch Summer Camp, whether off campus or on campus.
4. Covenant Not to Sue: The undersigned covenant(s) that the undersigned will not now, or at any time in the future, directly or indirectly, commence or prosecute an action, lawsuit or other proceeding against Bella Ranch, their respective officers, directors, agents, employees, successors, and assigns, or anyone acting on their behalf for damages, cost, losses, or claims of whatever kind and nature that arise out of or are in any way connected with the participant's participation in or attendance at the Bella Ranch Summer Camp, any such damages, costs, losses or claims being hereby expressly waived, released, discharged and satisfied.
5. Assurances: The undersigned has (have) full power, authority, capacity and right without limitation to execute, deliver and perform the agreements and covenants contained in this release and agree(s) to indemnify Bella Ranch, their respective officers, directors, agents, employees, successors and assigns against any claims to the contrary.
6. Binding Effects: The agreements and covenants in this release shall be binding upon the undersigned, his/her heirs, personal representatives, insurers, successors and assigns.

WE HAVE READ THIS DOCUMENT; WE UNDERSTAND IT IS A RELEASE OF ALL CLAIMS. WE APPRECIATE AND ASSUME ALL RISKS INHERENT IN HORSEBACK RIDING. IN CASE OF EMERGENCY, PLEASE NOTIFY ONE OF THE FOLLOWING:

Name: _____ Phone-Day: _____ Phone-Night: _____

Name: _____ Phone-Day: _____ Phone-Night: _____

I, _____, authorize Bella Ranch or the bearer of this consent to obtain such medical care, whether emergency care or otherwise, as it or the bearer deems necessary.

Participant is Allergic to: _____ Special

Medical Conditions: _____ Signed and

acknowledged this _____ day of _____, 20__.

Parent/Guardian/Responsible Party: _____ Relationship to Minor: _____

NOTARY: SUBSCRIBED AND SWORN to before me on the _____ day of _____, 20__.

Notary Public State of Texas

Signature

Bella Ranch Liability Release and Agreement

for this Facility and Program (Please read carefully, and bring it pre-signed when you arrive to Bella Ranch, which for this agreement, is synonymous with the property located at 1331North Plum Creek Dr. Spring TX 77386. In consideration of being permitted to ride, interact with horses and ponies, take lessons, participate in special functions, which include traveling to and from special events, clinics, trail rides, special sessions, birthday parties, pony rides, equine assisted activities, volunteering and related events and activities;

I hereby: 1. Understand that horse-back riding is a high risk sport and I understand the inherent dangers of riding or being around horses and am participating at my own risk. Serious injury may result from using this facility. I am willing to accept the risk of working with/on horses. 2. Hold Bella Ranch; it's owners, employees, agents, and/or volunteers harmless for any and all injuries or illness incurred by myself, my minor children and any others that accompany me on said property. I shall bring no claims, demands, actions, causes or action and/or litigation against Bella Ranch and/or its associates or owners as previously stated for any loss due to bodily injury or death sustained by me, my minor children, legal ward, or horse(s) in relation to the premises and operation of this facility., which includes riding, handling, or being near horses and/or other animals. 3. Understand and agree that Bella Ranch is not responsible for any act, occurrence, or element of nature that can scare, endanger or cause harm to a horse, causing it to react in an unsafe manner. 4. Acknowledge that I am familiar with horse riding and understand the rules governing special activities and the importance of following Bella Ranch Rules. 5. Agree that prior to any horse related activity, I will inspect horse, equipment, facilities, etc., and if I believe anything to be unsafe or beyond my capability, I will immediately notify the person in charge and refuse to participate. 6. Acknowledge and fully understand that I will be engaged in an activity that might result in serious injury including permanent disability or death, and severe social and economic loss. Not only by my action, inaction, or negligence, but also by the action, inaction and negligence of others, the rules of the sport/activity, or conditions of the premises or equipment used. Further, I acknowledge that there may be other risks not known to me or foreseeable at this time. 7. Am aware of the risks involved with horseback riding and I assume these risks and accept personal responsibility for the damages following such injury, permanent disability or death. 8. Understand that no pets other than the animals of Bella Ranch will be allowed on the property. 9. Have checked with my child's physician and my son/daughter has been given a clean bill of health to participate in horse related activities OR has specific written permission by the child's physician and/or attending health care professional(s) to participate in horse related activities. 10. Understand that Bella Ranch cannot allow a person or persons to participate in any horse-related activity(s) if they have used: alcohol, controlled substances or any mood/mind altering substances. This includes illegal drugs, as well as prescription medication, if use of said medication in any way impairs a person's alertness or perception. 11. Understand and agree that anyone using this facility and/or parent/guardian will repair or reimburse Bella Ranch for all expenses which include materials and time in the event of any damage to equipment, jumps, arenas, or any part of the property that is damaged by their horse(s) or themselves. 12. Am aware that inhumane treatment of the horse(s) or repeated unsafe acts will immediately void all agreements and I will forfeit any fees and rights to access this center. 13. Understand that the stable owner shall not be liable for an injury to the horse(s) or damage to any property should the said horse(s) escape from the enclosure or while on the property. I have read this warning, waiver and release, and understand that I give up substantial rights by signing it, and knowing this I sign it freely and voluntarily agree to participate and/or have my minor children participate, knowing these risks and conditions involved and do so of my own free will.

Name of Participant _____

Signature of Parent _____ Date ____/____/____

MEDICAL EMERGENCY INFORMATION

In the event of an emergency:

CONSENT PLAN In the event that emergency medical aid/treatment is required due to illness or injury during center activities, or while on the property of the agency, I authorize Bella Ranch to:

1. Secure and maintain medical treatment and transportation if needed.

2. Release participant records upon request to the authorized individual or agency involved in the medical emergency treatment. This authorization includes x-ray, surgery, hospitalization, medication and any treatment procedure deemed "life saving" by the physician. This provision will only be invoked if the person(s) above is unable to be reached.

Consent Signature _____ Date _____

Parent or legal guardian, if under 18 _____

NON-CONSENT PLAN I do not give my consent for emergency medical treatment/aid in the case of illness or injury during center activities or while on the property of the agency. In the event emergency treatment/aid is required, I wish the following procedures to take place: _____

Consent Signature _____ Date _____

Parent or legal guardian, if under 18 _____

RELEASE AND HOLD HARMLESS AGREEMENT

No student will be accepted for equine assisted activities and/or horsemanship instruction and no volunteer accepted for service at Bella Ranch until this form has been READ, UNDERSTOOD, COMPLETED AND SIGNED by the parent(s) or guardian(s) of a minor or, if the student or volunteer is of legal age and sound mind, by the student or volunteer. Although participation in the program is under strict supervision and every effort is made to avoid injury or accident, the undersigned acknowledges the inherent risks involved in riding, driving, and working around horses. This includes bodily injury from horseback riding or driving or being in close proximity to horses. Among other risks, both horse and rider can be injured during normal use or in competition and schooling. In order to provide this valuable service, NO LIABILITY can be accepted by the Bella Ranch or any of the organizations or persons connected with the above named facility. IN CONSIDERATION for the privilege of riding, driving and/or working around horses at the Bella Ranch the undersigned, as self, or as parent(s), or guardian(s) of the named minor, jointly or severally, do hereby agree to release, hold harmless and indemnify Bella Ranch, its officers, directors, trustees, agents, employees, volunteers representatives, successors and assigns from all manner of liability, loss, costs, claims, demands and damages of every kind and nature whatsoever, including but not limited to reasonable attorney's fees, which the undersigned or said minor may now or in the future have against Bella Ranch, its officers, directors, trustees, agents, employees, volunteers, representatives, successors and assigns, on account of any accident, damage, injury or illness, physical or mental condition, known or unknown, to the undersigned or said minor, or the treatment thereof, arising as a result of, or in any way connected to, acts or incidents occurring at or relating to Bella Ranch, its officers, directors trustees, agents, employees, volunteers, representatives, successors or assigns, including but not limited to their negligence or gross negligence in rendering the services described above or in any way incidental thereto. I have carefully read this agreement and fully understand its contents.

Participant Name (Print) _____

Parent/Guardian Signature _____ Date: _____

CAMP RULES

- DRESS CODE
 - Must ride in jeans and boots. T-shirts and tank tops allowed.
 - Shorts and tennis shoes can be worn for games and activities.
- CAMPERS
 - **Campers must be checked in upon arrival and out before departure every day by their parent or guardian.** Team leader will check students in and out every morning and afternoon. Please let your leader know if different people will be picking up and dropping off.
 - Cell phones are allowed during meal times. Campers can ask to have a staff member record their rides on their phones.
 - No profanity. ○ No bullying. ○ No electronic devices other than cell phones. ○ No running, screaming or horseplay around the horses.
 - NEVER go into any pasture with any horses without staff's permission and guidance.

We have the right to send home any camper who does not comply with rules, without a refund.

Signature of Camper (if able): _____ Date: _____

I understand and will adhere to the above stated rules at all times during camp, knowing that I can call the camp secretary at any time for information regarding my child(ren).

Signature of Parent or Guardian: _____ Date: _____

WHAT YOU NEED FOR CAMP EVERY DAY:

- Bug repellent/sunscreen
- WATER BOTTLE.
- Lunch, if desired (recommended if your camper is a picky eater!)
- Clean clothes: (we recommend bringing an extra pair every day, just in case.)
 - Swimsuit, in case of water activities
 - jeans for riding
 - boots for riding
 - tennis shoes and shorts/active wear for games and activities
- Medications, Epi-Pen, etc. - must be turned into team leader on first day

**We do have an on-call nurse and multiple staff members who are fully certified in pediatric CPR and first aid.