



Top Horse Solutions Horsemanship Camp 2010



March 14th-19th, 2010
Check In: March 14th, 3:00 pm
Check Out: March 19th, 4:30 pm

Top Horse Solutions Horsemanship Camp will be held at the beautiful **Parrie Haynes Ranch in Killeen, Texas**. The ranch consists of over 4500 acres with over 50 miles of marked trails. During your 6 day 5 night stay you and your horse will have a chance to explore this hidden horsetopia.

Upon arrival on Sunday March 14, 2010 at 3:00 pm, campers will meet and greet with clinicians and will practice some of the exercises that will be performed throughout the week.

Cost for Horsemanship Camp: \$800.00 per camper
A limited number of scholarships are available

For scholarship details, contact Sarah Carbocci at 804-814-2070 or
Sarah@TopHorseSolutions.com

Mail Registration, Health Information & Fee to:

**Top Horse Solutions
c/o Sarah Carbocci
4501 Steamboat Springs Drive
Killeen, TX 76542**

Registration and fee must be postmarked by March 10th, 2010.

Make checks payable to **Top Horse Solutions**

All campers must be at least 10 years of age. Space is limited to 25 campers: 10 campers are required to hold the camp.

For additional information and questions, contact Top Horse Solutions Sarah Carbocci at 804-814-2070 or Sarah@TopHorseSolutions.com.

Your organization must provide chaperones with their group. If you do not belong to an organization, you will be assigned to a chaperone.



**Top Horse Solutions
4-H Horsemanship Clinic
Camper Registration Form**

Name of Camper	Date of Birth	
Address		
City	State	Zip
Home Phone	Parents email	
Mother's Name	Cell #	Work #
Father's Name	Cell #	Work #
Allergies		
Activity Restrictions		
Club Name and Leaders Name	Phone #	
What are your goals for this camp?		

Camp Rules and Regulations

1. Approved riding helmets must be worn by all campers whenever riding on the grounds.
2. Long pants and boots with riding heel must be worn when riding or handling horses.
3. Riding someone else's horse or riding double is not permitted.
4. Campers' must keep horses in designated areas.
5. No fire arms, B-B guns, sling-shots, or air guns may be brought onto the campground property.
6. Trainers, specialists, presenters, caterers and riding schedules are subject to change at any time and without notice. In this event attendees will be notified as soon as practical.
7. The campers are to treat staff members, chaperones, other campers, and animals with respect.
8. Foul language will not be tolerated.
9. The cottages are to be kept neat and tidy. Everyone is responsible for their own belongings. I-pods and other portable devices are permitted but not encouraged. THS will not be responsible for the loss, theft, or damaged items.
10. Quiet hours and lights out are enforced from 10:00pm to 06:30am.
11. Campers will be allowed cell phones during the week. Cell phones are **NOT** to be used during instruction time from 6:00am to 7:00pm.
12. Top Horse Solutions reserves the right to exclude any horse they consider to be a danger to campers and/or staff.
13. Campers are responsible for their own horse, and all camp activities are at your own risk.
14. Camper's violating camp rules and regulations, found to be outside of their bunkhouse, or off premises during their stay will be expelled from the camp and their fees and expenses will not be refunded.
15. Any camper who is disruptive to the camp program or is behaving in a manner in which is harmful to themselves or others may be dismissed from camp with no refund.

Acknowledgement of Rules

I _____ have read and understand the Rules and Regulations set forth by Top Horse Solutions Horsemanship. I agree to obey all rules and regulations.

*Campers Signature _____ Date _____

I have read and understand the Rules and Regulations set forth by Top Horse Solutions Horsemanship. I understand that if my child does not obey the rules and regulations, I will be called to pick them up immediately.

*Parent/Guardian Signature _____ Date _____

Registration and Cancellation Policy

A completed registration package accompanied by the down payment of the tuition deposit is required upon registration. If paid by check you will receive a confirmation by email once your check has been accepted. Credit Card payments are accepted through Pay-Pal with an additional 2.5% processing fee.

- Registrations received on or before Jan. 15, 2010 require a \$400 down payment. Two payments of remaining tuition are due on the following schedule: Feb. 15, 2010, a second payment of \$200 is due. Final payment of \$200 is due on Mar. 10, 2010.
- Registrations received between Jan. 15 and before Feb. 16, 2010 require a \$600 down payment. Final payment of \$200 is due on Mar. 10, 2010.
- Registrations received between Feb. 16 and before Mar. 11, 2010 require full payment.
- Registrations after Mar. 10, 2010 will be handled on a case by case basis and may require an additional fee. Any mail in registrations must be post-marked before Mar 10, 2010.

Deposits and camp fees will be refunded in full within 5 business days if the camp is cancelled for any reason by Top Horse Solutions Horsemanship.

Our expenses are fixed in advance and based on a minimum number of Top Horse Solutions Horsemanship attendees; therefore there will be no refunds or deductions of any fees for arriving late or leaving early. Deposits must be paid by the declared date and final payment must be made in full before camp is attended. If final payment is not received by March 10, 2010 your deposit will be forfeited.

In the event that the camper cannot attend camp for medical or veterinary reason, they may receive a refund providing the request to withdraw from the camp is received in writing and the request is postmarked according to the refund schedule listed below.

Due to the fixed expenses of the camp, no refunds can be honored after March 10, 2010 for any reason.

Refund Schedule

A partial refund of deposit and payments may be returned in accordance to the schedule listed below:

- Before Dec 31st -\$250
- Jan 1st- Jan 31st -\$150
- Feb 1st- Feb 28th - \$100

Dismissal from camp for cause

Any camper who violates camp rules and regulations or uses or possesses prescription or over-the-counter drugs other than listed on their medical form; provides prescriptions and non-prescription drugs to another camper; uses or possesses alcohol or other any illegal or intoxicating substance; uses or possesses matches, lighters or other fire-starting implements; uses or possesses firearms, knives or other weapon; or otherwise endangers other people, animals, or property will be expelled immediately and tuition will be forfeited.

Parent/guardians will be notified immediately at their contact numbers and will be required to make arrangements to pick up their child and horse immediately.

Emergency Contacts

Enclosed in your registration packet is a form for you to provide all your emergency contact information. Please consider carefully who you designate as an emergency contact if you cannot be reached. In the event that you cannot be reached, Top Horse Solutions Horsemanship will contact whomever you have provided as your emergency contact. If emergency contact(s) are also designated as individuals authorized to pick up your child they will need to provide a state photo ID before leaving with the child – NO EXCEPTIONS.

Visitors and Phone Calls

Your child's day will be busy and fulfilled daily from 6:30am to 7:00pm. Parents are encouraged to allow their child to experience all that the THS camp has to offer, and we ask that visitation be minimal. Your child will be reminded to call you each evening. Visitors are restricted to immediate family members only. No other visitors will be permitted during the week. Campers are allowed to carry cell phones with them to camp under the condition that they do not use them during instructional time. Free time will be given to the campers each day at which time cell phone use will be appropriate.

Parents are welcome to chaperone during the week and stay with campers at a nominal fee. Chaperones are also welcome to bring their horse to follow campers on trail ride for additional charges. Their participation will NOT be instructional. For additional information, contact Sarah Carbocci at 804-814-2070 or Sarah@TopHorseSolutions.com.



Medical Release Form

The following information about this camper

NAME	BIRTH DATE	
ADDRESS		
CITY	STATE	ZIP
PARENT/LEGAL GUARDIAN NAME		
HOME PHONE	WORK PHONE	OTHER

What other adult may be called in case of emergency? _____

Phone numbers: _____

Family Physician: _____ Phone: _____

Facility of choice (if an emergency) _____

Insurance Company: _____ Policy number: _____

Allergies: Medications: _____

Foods: _____

Date of last Tetanus shot: _____ Immunizations Current? _____

PRESCRIPTION DRUGS ARE THE SOLE RESPONSIBILITY OF THE CAMPER AND MUST BE IN ORIGINAL CONTAINER ONLY. Top Horse Solutions may assist, but will not be responsible for administering prescription medication.

Prescription Medications taken by my child:

Drug name: _____

Date and Times: _____

Drug name: _____

Date and Times: _____

Drug name: _____

Date and Times: _____

I give my consent for my child to receive only those over-the-counter medications I have **initialed** below when the conditions warrant the need i.e. headache, allergic reaction, up –set stomach, itchy rash etc....

Tylenol/Acetaminophen____ Ibuprophen____ Benadryl____ Pepto Bismol____
Hydrocortisone cream 1%____

My child is diagnosed or prone to:

Please check all that apply: Hypoglycemia____ Diabetes____ Ulcers____ Headaches____
Asthma____ Nose Bleeds____ Anemia____ Visual Problems____ Hearing Problems____
Bleeding Problems____

Previous Fractures? ____ Where? _____

Any type of activities prohibited due to physical limitations:

Joint Problems: Yes/No Knee____ Hip____ Back/Neck____ Ankle____ Wrist____ Elbow____
Shoulder____

If **Yes** please explain below:

***In the event of a medical emergency, I hereby authorize Top Horse Solutions to employ a licensed medical doctor to render any medical services, which may, in the sole direction of the doctor, be necessary. I further authorize Top Horse Solutions to take my child to the hospital if it should be deemed necessary, and I agree that I will be solely responsible for any and all medical expenses including emergency transportation of my child.

By allowing my child to participate in the Top Horse Solutions Horsemanship Camp, the associated organizations and entities assume no responsibility for injury or damages incurred by my child. I further understand that I shall bear full responsibility for the consequences of my child's own actions. My signature attests that I have read, understand and agree to the terms of this document.

*Signature of Parent/Guardian _____ Date _____

Name of Horse:	
Age of Horse:	
Veterinarian:	Phone:
Farrier:	Phone:

Horse Farrier and Medical Treatment

FARRIER:

In the case of a farrier emergency or need for farrier treatment and after reasonable effort has been made to contact me, the farrier listed above will be contacted. I hereby give my permission for my horse to be treated. If the listed farrier is not available, the on call farrier for the camp will be called. I agree to be responsible for the expenses incurred in the care and treatment of my horse.

VETERANARIAN:

In the case of a medical emergency or need for medical treatment and after reasonable effort has been made to contact me, the veterinarian listed above will be contacted. I hereby give my permission for my horse to be treated. If the listed veterinarian is not available, the on call veterinarian for the camp will be called. I agree to be responsible for the expenses incurred in the care and treatment of my horse.

Signature of horse owner _____ Date _____

Camper Check List

For Camper: (All campers are limited to one duffel bag and one small back pack)

- Certified riding helmet
- Riding boots with heels (no sneaker or open-toed shoes during riding)
- Riding clothes for 6 days (No laundry is available)
- Jacket or sweater for cold mornings (rain gear just in case)
- Toiletries: Toothpaste, soap, shampoo, towel etc.
- Medications (if needed)
- Sleeping bag or bed sheets and pillow
- Insect repellent if desired
- Appropriate casual and sleeping attire

For Horse:

- Grain, hay, etc. for 6 days
- Water bucket, feed bucket and hay bag or net
- Grooming equipment: brushes, hoof pick etc.
- Pitchfork and muck bucket
- Saddle, saddle-pad, bridle.
- Shavings
- Vet supplies, vet wrap, antibiotic ointment, gauze pads (in case of emergency)
- Copy of negative coggins

SOME TRAILS ARE VERY ROCKY THEREFORE, ALL HORSES ARE REQUIRED TO HAVE FRONT SHOES!



Top Horse Solutions Horsemanship Camp
March 14 – 19, 2010
Parrie Haynes Ranch
Killeen, Texas

PHOTO RELEASE FORM

I grant permission to Top Horse Solutions and its agents and volunteers, to use and take photographs of my child on the date and locations listed below for the use of Top Horse Solutions Horsemanship publications such as advertising brochures and newsletters, and to use photographs in electronic versions of the same publications for Top Horse Solutions' website.

I hereby waive any right to inspect or approve the finished photographs of printed or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising from or relating to the use of the photograph.

I have read and fully understand the contents, meaning and impact of this release. I understand that I am free to address any questions or concerns I have about this release before signing. I also understand that failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

Location of Photo: Parrie Haynes Ranch/ Top Horse Solutions Horsemanship Camp March 14-19, 2010

Name of Camper (Please Print) _____

*Campers Signature _____ Date _____

*Signature of Parent/Guardian _____ Date _____