



Rainbow Ridge Farm Equestrian Center llc.

4841 Applebutter Rd.Pipersville, PA 18947

2023/24 Equine Homeschool Program &

Farm Homeschool Enrichment

Please check which program you registered for:

___ Equine Homeschool Program

___ Farm Homeschool Enrichment

Please complete all fields. Use a separate form for each child.

Child's name:_____

Age:_____

Entering Grade:_____

Birth Date :(mm/dd/yy)._____

Sex: __ Male__ Female

Parents or legal guardian's full names:

Street Address:_____

City:_____

State:_____

Zip:_____

Home Phone:_____

Work Phone:_____

Cell Phone:_____

E-mail address:_____

If 2nd. Street Address:_____

City:_____

State:_____

Zip: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

E-mail address: _____

Emergency contacts other than parent or guardian:

Name: _____ 1st Phone: _____

Relationship: _____ 2nd Phone: _____

Name: _____ 1st Phone: _____

Relationship: _____ 2nd Phone: _____

Authorized pickup person in addition to parents or guardians: (I.D. must be presented at time of pickup).

Name: _____

Street Address: _____

City: _____

State: _____

Zip: _____

Phone: _____

Please list in full any allergies: _____

Date of last tetanus shot: (mm/dd/yy). _____

Are all of your child's vaccinations up to date? _____

Do we have permission to administer minor first aid if needed?

___ Yes ___ No

Do we have permission to seek medical attention in an emergency?

___ Yes ___ No

Child's doctor's name:_____ Phone:_____

Health card or Blue Cross number:_____

Grade my Child is entering this year_____

Riding skill level:

Beginner____

Intermediate____

Advanced____

SIBLING INFORMATION: Please list any siblings (and their birth dates) who would be attending this facility.

Child:_____

Birthdate:_____

Child:_____

Birthdate:_____

Child:_____

Birthdate:_____

Emergency Contact Form- (To be Kept in Program Binder)

EMERGENCY CONTACT / PARENTAL CONSENT FORM

55 PA CODE CHAPTERS 3270.1248]b). 3270.181 & 182; 3280.124 (a/b). 3200.181 & 182; 3390.124 (2)(b). §290,181 & 182

Child's Name _____

BIRTHDATE _____

ADDRESS _____

MOTHER'S NAME _____

LEGAL GUARDIAN _____

HOME TELEPHONE NUMBER _____

ADDRESS _____

Employer's Name _____

BUSINESS TELEPHONE NUMBER _____

FATHER'S NAME _____

LEGAL GUARDIAN _____

HOME TELEPHONE NUMBER _____

ADDRESS _____

Employer's Name _____

BUSINESS TELEPHONE NUMBER _____

ADDRESS _____

EMERGENCY CONTACT PERSON(S)

NAME _____

TELEPHONE NUMBER WHEN CHILD IS IN
CARE _____

PERSON(S) TO WHOM CHILD MAY BE RELEASED

NAME _____

ADDRESS _____

TELEPHONE NUMBER WHEN CHILD IS IN CARE _____

NAME OF CHILD'S PHYSICIAN/MEDICAL CARE _____ -

PROVIDER _____

TELEPHONE
NUMBER _____

ADDRESS _____

SPECIAL DISABILITIES (IF
ANY) _____

ALLERGIES (INCLUDING MEDICATION
REACTION) _____

MEDICAL OR DIETARY INFORMATION NECESSARY IN AN EMERGENCY
SITUATION _____

MEDICATION, SPECIAL
CONDITIONS _____

ADDITIONAL INFORMATION ON SPECIAL NEEDS OF
CHILD _____

HEALTH INSURANCE COVERAGE FOR CHILD OF MEDICAL ASSISTANCE
BENEFITS POLICY NUMBER
(REQUIRED) _____

PARENT'S SIGNATURE IS REQUIRED FOR EACH ITEM BELOW TO INDICATE
PARENTAL CONSENT OBTAINING EMERGENCY MEDICAL
CARE _____

ADMIN. OF MINOR FIRST - AID PROCEDURES

SIGNATURE OF PARENT or
GUARDIAN _____

DATE _____

SIGNATURE OF PARENT or
GUARDIAN _____

DATE _____

Rainbow Ridge Farm Equestrian Center llc
EQUESTRIAN INFORMATION
AND PERMISSION

ALL ADULT RIDERS OVER 18. OR CHILD'S PARENT OR GUARDIAN MUST READ
THE

FOLLOWING CAREFULLY.

PROTECTIVE ATTRE

1. I am hereby advised to wear an approved by ASTM or SEI well fitted riding helmet with a harness strap fastened securely under the chin.. If you do not own one, one will be provided for you.
2. I am hereby advised to always wear hard-soled fully enclosed shoes or boots with a small heel. Long pants must also be worn while riding.
3. I am hereby advised that gloves should be worn during riding, but are not a requirement.

THE HORSE

I am advised that horses are unpredictable by nature, with minds of their own, as are all animals. Horses may become frightened and/or nervous from loud noises or something they have never seen before, just as a human would react. This is to advise the rider not to make loud noises or sudden movements around the horse.

I have read and do understand the above concerning correct attire and the nature of the horse.

Signed:

Date _____

Parent/Guardian for: _____

Rainbow Ridge Farm Equestrian Center Ilc
4841 Applebutter Rd. Pipersville, PA 18947

EQUESTRIAN PARTICIPANTS ONLY: RIDING INSTRUCTION AGREEMENT/LIABILITY
RELEASE:

By this agreement, made and entered this
day _____

by and between (parent) _____

_____, who resides at herein referred to a "I" and
Rainbow Ridge Farm EC Ilc., Pipersville, Pennsylvania 18947 hereinafter referred to as
This Stable.

IT IS HEREBY AGREED TO AS FOLLOWS: 1. That I, the undersigned, do
for myself or on behalf of my child or legal ward, hereby voluntarily request
to participate in riding instruction as a student at This Stable, and that
student will ride a school horse provided by This Stable for instructional
purpose.

2. That a parent or guardian and student understand that horses are
unpredictable by nature; that when frightened or angry or under stress, a
horse's natural instincts are to jump forward or sideways, to run away from
danger at a trot or gallop, to kick, to buck, or rear up in front, or bite; that
horses are extremely powerful; and that if a rider falls to the ground, the fall
distance be generally from 3 1/2 to 5 1/2 feet. I understand these risks, and
voluntarily assume these risks and dangers.

3. That parent or guardian and student understand that upon mounting the
horse and taking up the reins the student is in primary control of the horse
and that This Stable is not responsible for the results of the student's actions
or inactions. The student further agrees to not abuse, misuse, or deliberately
agitate the horse as these actions may result in increased risk to himself and
others.

4. LIABILITY RELEASE: That I understand that except in the event of This
Stable's wanton and willful negligence, I am responsible for bodily injury or
property damage which I or my child or legal ward should sustain on This
Stable's premises and/or trail and or riding a horse, and/or while transit in

to or at horse shows, trail rides, or similar expeditions, and for any time I or my child or legal ward shall lose from employment or school or other activity, and for medical expenses or any other expenses incurred because of such bodily injury or property damage; and that I hereby, for myself, my heirs, administrators and assigns release and discharge the owners, operators and sponsors of This Stable and their respective servants, agents, officers and all other participants of and from all claims, demands, actions and causes of action for such injuries sustained to my person, or that of my child or legal charge and/or property.

5. That this agreement is entered into in the state of Pennsylvania and will be interpreted and enforced under the laws of that state.

6. Upon the signing of the agreement, student acknowledges that he/she has read and agrees to be bound to This Stable's rules incorporated herein by this reference.

I, THE UNDERSIGNED, BEING OF LEGAL AGE AND SOUND MIND AND NOT BEING UNDER THE INFLUENCE OF ALCOHOL, DRUGS, OR INTOXICANTS, HAVE READ AND UNDERSTAND THE FOREGOING AGREEMENT AND RELEASE.

FULL NAME OF STUDENT RIDER WHO IS UNDER AGE OR GUARDIANSHIP: _____

AGE: _____

PARENT/GUARDIAN _____

DATE: _____

What to Bring to our Homeschool Programs

Equestrian Program 1-3

- 1) Long Pants to ride in i.e.: Jeans, Stretch Pants or Riding Pants. (Kids can bring shorts to change into after riding).
- 2) Riding Boots or Shoes with a small heel. No open toed shoes
- 3) Safety Helmets are provided or you can bring your own.

Farm Homeschool Enrichment A&B

- A) Please wear long pants and boots, we will be in mud and dirt depending on weather.
- B) Gloves are recommended for farm work.

****Please dress appropriately for outdoors as weather changes, layers recommended.**

Sunscreen should be applied before coming to the farm.
Water Bottle clearly labeled with your child's name.

*Snacks and beverages are available for purchase at the Country store onsite, please send your child with money to make purchases or You can pay ahead of time and make a credit account at the store.

School Supplies (To cut down on the transfer of germs each child must have their own supplies)

Backpack for Change of Clothes and Supplies

Hand Sanitizer

glue stick

Pencils

Pencil Sharpener

Crayons

Colored Pencils

Markers

Erasers

Please make sure all your child's belongings are clearly labeled.

