



2017 SUMMER PROGRAMS

Registration

BUCKAROOS July 17-21 August 14-18

WRANGLERS July 10-14 August 7-11

Program Fee:
285 + GST =
\$299.25

Participant Information

Name: _____ Age: _____ Grade: _____

Address: _____

Phone #: _____ Email: _____

Horse-Related Experience: _____

Allergies: _____

Parent/Guardian Information *(If participant is under 18 years of age)*

Name: _____ Email: _____

Phone #: _____ Cell: _____

Emergency Contact

Name: _____ Phone #: _____

Participant's Doctor

Name: _____ Phone #: _____

Payment Method: _____ Waiver Signed

All applicants must contact us first to ensure availability – toll free (877) 949-2410

Questions? Contact Kendra at (877) 949-2410 or vacation@falconbeachranch.com



**2017 SUMMER PROGRAMS
Waiver Form**

RIDE AT YOUR OWN RISK

Our horses are quiet and well trained, but may still react unpredictably to sounds, sudden movement, unfamiliar objects, other animals, or people. These reactions include, but are not limited to shying, running, kicking, biting or bucking, and can cause a rider to be injured or fall. Much of this behaviour can be controlled by good horsemanship. When mounted on a horse, each rider will assume responsibility for the physical control of his/her own horse. When participating in activities around horses, each participant will be aware of his/her surroundings and follow the instructions of the program instructor and other ranch staff. I understand that a fall from a horse can result in serious injury or death.

I, the undersigned, have read the above information and understand that because of the inherent ruggedness and unpredictability of this sport, I will be RIDING AT MY OWN RISK. I agree to follow the rules of the program instructor and other ranch staff. I am waiving my legal right to take action against Falcon Beach Ranch or people acting on its behalf for any mishap occurring while I, my children, associates or others in my charge are visiting or participating in activities at Falcon Beach Ranch.

Parents/Guardians must print the names of their children who are under 18 and sign consent.

Participant Name: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date Signed: _____