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9513 South Hwy 183 Austin, TX 78747 · 512-243-2323 · www.ScissortailHillEquestrian.com

## 2019 Summer Camp Application

Camper

Name \_\_\_\_\_

Gender \_\_\_\_\_ Age \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Primary Phone \_\_\_\_\_ Secondary Phone \_\_\_\_\_

Email  
Address \_\_\_\_\_

Please describe camper's riding experience:

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**Please select the best description of your rider (*helps us prepare and plan horses*):**

**Beginner** - Little or no horse experience, very young riders, riders lacking confidence, or needing a refresher. A rider can be considered Intermediate once the rider is fully confident controlling a horse at the trot without a leader.

**Intermediate** - Riders with at least enough experience to confidently control a horse at the trot. Basic horsemanship knowledge, like grooming, required.

**Advanced** – Riders at a progressed stage of their riding (in any saddle or discipline) who are either jumping already or interested in trying out jumping. This includes riders Eventing up to Beginner Novice level and Hunters riding 2'3"/2'6". Riders must be willing to canter or lope, or learn.

**Please select the camp session(s) you would like to register for: ALL LEVELS**

June 24-28  
Session 1

July 15-19  
Session 2

July 29- Aug 2  
Session 3

August 5-9  
Session 4

### Transportation

Pick up and drop off service is available to a limited number of campers on a first come first serve basis. Full payment reserves spot on van. \$10/daily or \$40/weekly

Request Pick Up/ Drop Off service at

HEB Plus, Kyle

Elm Grove Elementary, Buda

Randalls at Slaughter & Brodie

Home Depot at Slaughter & I35

Callahan Feed Store

### Tuition

Camp Tuition is \$350 per session. A deposit of \$50 is required to hold a spot and is fully applied to tuition. Campers may also attend on a per day basis pending availability for \$75 per day. Please select any additional services requested

Van Transportation  \$10/day \_\_\_\_\_ (days) or  \$40/weekly

Early Drop Off/Late Pick Up \$5/day \_\_\_\_\_ (days/times)

"Bring Your Horse To Camp" horse care \$100/week

### What to Bring

Campers need to bring

- Riding pants or jeans
- Riding shoes or boots
- Sack lunch
- Drinks and/or water bottle
- Sunscreen and hat or visor
- Bug Spray/repellent

Campers may bring

- Change of clothes
- Riders own helmet (we do provide)

**Campers should *not* bring**

- **Cell phones, tablets and other personal electronics**
- Valuables (jewelry, cash)

### In case of emergency, contact

1. Name \_\_\_\_\_  
Relationship to Camper \_\_\_\_\_  
Home # \_\_\_\_\_  
Work # \_\_\_\_\_  
Cell # \_\_\_\_\_

2. Name \_\_\_\_\_  
Relationship to Camper \_\_\_\_\_  
Home # \_\_\_\_\_  
Work # \_\_\_\_\_  
Cell # \_\_\_\_\_

**Insurance**

Name of Policy Holder: \_\_\_\_\_  
Address: \_\_\_\_\_  
Company: \_\_\_\_\_  
Policy No.: \_\_\_\_\_

In the event that none of the above can be reached, instructors, agents and employees of Scissortail Hill Equestrian, are given permission to contact necessary professional.

Doctor \_\_\_\_\_ Phone \_\_\_\_\_

Hospital: \_\_\_\_\_

*It is further understood that Scissortail Hill Equestrian and it's instructors, agents and employees are hereby released from liability with respect to any accidents that might occur. I also understand that Scissortail Hill Equestrian does not provide accident insurance.*

**Immunization Dates** State Law requires that we have the following on file

DPT \_\_\_\_\_ MMR \_\_\_\_\_ TB \_\_\_\_\_ Polio \_\_\_\_\_ Other \_\_\_\_\_

**Allergies**

Insect \_\_\_\_\_

Stings \_\_\_\_\_ Asthma \_\_\_\_\_

Food \_\_\_\_\_ Other \_\_\_\_\_

Please use this space to supply Scissortail Hill Equestrian with any information (physical, medical, social, psychological, etc.) that we should know about the camper. Include any regular or emergency medications.

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WARNING: UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICES AND REMEDIES CODE), AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES.

Signature of Parent or  
Guardian: \_\_\_\_\_  
Date: \_\_\_\_\_