



Getner Farm Camp 2008

Childs Name _____

Parents Name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____

Work _____

Cell Phone _____

Emergency Contact and # _____

E mail _____

Dates enrolled _____

Deposit Amount \$ _____

Please make all checks payable to Kathi Meenan

I _____ understand that my child _____ will be taking riding lessons at Getner farm. I am aware of the dangers of this sport and the fact that even with safety precautions taken to avoid accidents and injuries, accidents can happen when dealing with animals. In the event of an accident I take full responsibility for all or any injuries my child could sustain during his/her time at the barn or riding.

Signature: _____ Date: _____

There are times when we will take the children on trail rides and sometimes and on to the road (often to reach the trails). If you don't want your child to do this please write that below:

Childs Age _____ Height _____ Weight _____