

INSTRUCTIONS FOR SUBMISSION:

Thank you for registering for our STARS Equine Adventure Camp for Kids. We are excited to welcome your family to our camp! This free, 4-day camp is for children aged 8-18, who have experienced a loss. Our camp includes interactions with horses, fishing, hiking, archery and games to promote healing from loss due to death.

Please note that your registration is not complete unless this packet has been signed and received, for EACH child who will be attending camp. Please do not combine multiple children on one form. Please submit your completed forms via email to Marcella.cameronmeyer@stelizabeth.com.

CAMP REGISTRATION DETAILS:

Child's first and last name:

Your child's t shirt size (Youth S-L, or Adult XS-XXXL):

Lunch will be served daily during camp. Please indicate below if your child has any allergies or dietary restrictions.

Please select the transportation option below, which best suits your family.

- I will drop off/pick up at the Bunning Community Grief Center each day.** You must drop off/pick up your child(ren) at the Bunning Community Grief Center located at 483 South Loop Rd, Edgewood, KY 41017. **You MUST arrive before 8:15 AM to make shuttle, will return between 2 and 2:15 PM each day.**

- I will provide my own transportation to the New Day Ranch each day.** You may drop off/pick up your child(ren) directly at New Day Ranch located at 14838 Rosenstiel Rd, Verona, KY 41092. **Camp starts promptly at 9 AM and ends at 1:30 PM, each day.**

ACKNOWLEDGEMENT:

I hereby acknowledge that I am aware that this camp is offered free to grieving children and teens. In order to be responsible with funds provided from generous sponsors, I agree to notify St. Elizabeth's Hospice and Grief Center if we can no longer attend camp as soon as possible so that another person/ family may take that spot. Spots will be filled on a first-come, first-served basis, and space may be limited due to Covid-19 safety guidelines.

Printed Parent/Guardian Name

Signature of Parent/Guardian

Date

Please complete all 4 pages in this packet for each child!

CONSENT:

I hereby consent to allow my child, [] to participate in the STARS Equine Grief Camp on [] (dates) for the purposes of addressing issues related to the death of a loved one. I also understand this camp experience is intended to provide encouragement and assistance for my child in dealing with the death of a loved one. I acknowledge that this is not a therapy group, and not intended to address issues which could be identified as a disorder, pathology or syndrome. I also acknowledge that it is required by law that any suspicion or evidence of child abuse that comes up during this camp session must be reported to the proper authorities.

If your child is not benefitting from this program or is consistently disruptive, we will work with you [], the guardian of [] on how this can be rectified.

In case of emergency please notify: [] at [].

RISK AND RELEASE:

I understand that my child's participation in programs offered by St. Elizabeth Hospice/ STARS is based on a "Challenge by Choice" philosophy. I recognize that the program is designed to use experiential, engaging, teaching techniques, but that my/my child's participation is purely voluntary, and I elect to participate in spite of the risks. I am aware that experiential outdoor pursuits such as horseback riding, archery and other activities provided by St. Elizabeth's at New Day Ranch for which I and/or my child have enrolled entails certain risks.

Therefore, for myself/my child, I expressly, knowingly and voluntarily assume all risks involved in my/their participation, and do hereby release St. Elizabeth's Hospice and its members, trustees, officers, employees, volunteers, and independent contractors and agents from any and all liability, damages, costs, and expenses arising out of or relating to bodily injury, loss of life or personal property that may occur as a result of participating in this program.

I have read and understand and accept the terms and conditions stated herein and acknowledge that this agreement shall be effective and binding on the parties during the entire period of participation in the said program.

Printed Parent/Guardian Name	Signature of Parent/Guardian	Date

PHOTOGRAPHY:

We will be taking pictures and potentially having a local news station out to do a story on the Equine Grief Camp. If this is an issue, please let us know. If it is not a problem, fill in the following:

I hereby give my permission for photographs, video or quotes of or by my child: [] while participating in the Equine Grief Camp to be used for educational or promotional uses only. I also understand these photographs, video or quotes will remain the property of the STARS program and will be used only in a discreet and respectful manner for the purpose of promoting the benefits of the STARS program.

Printed Parent/Guardian Name	Signature of Parent/Guardian	Date

New Day Ranch Inc.

GENERAL AGREEMENT & LIABILITY RELEASE

Participant: Age:

I, (Parent or Guardian if person named above is under the age of 18), hereby acknowledge that I have requested permission to participate in equestrian or other activities on the premises of the New Day Ranch Inc. and M & A Schmidt LLC property.

I further understand that my request may be denied, or my participation privileges may be revoked at any time and at the sole discretion of either party. Reasons for denial or revocation of participation include but are not limited to:

- Known or observed abuse of a horse.
- Inappropriate behavior or language.
- Any behavior by the member or the member's horse creating a tense or hostile environment.
- Any damage to the facility by the member or their horse.
- Inviting non-member guest to participate in riding activities without following proper authorization procedures.
- Unauthorized use of facility during or outside of hours of operation.
- Failure to pass a background check (when applicable)

I agree to abide by the New Day Ranch Inc. rules and regulations as posted or directed by staff.

I am aware that riding, vaulting, trail riding, jumping, hippo therapy, equine related therapy and all other forms of equestrian activities can be hazardous. I am voluntarily participating in these activities with the knowledge of the danger involved and hereby agree to accept any and all risks of injury or death.

In consideration for being permitted to use the facilities at New Day Ranch Inc. and M & A Schmidt LLC. and/or participate in any New Day Ranch Inc. facilitated program, I hereby agree that I, my heirs, my distributes, guardians, legal representative and assignees will not make a claim against, sue, attach the property of or prosecute New Day Ranch Inc. and M & A Schmidt LLC. , its directors, officers, members, employees, volunteers or assignees, for any claim I now have or may hereafter have for death, injury or property damage resulting from my use of the facilities at New Day Ranch Inc. and M & A Schmidt LLC. or my participation in any New Day Ranch Inc. endorsed activities, whether caused by my acts of omission or negligence or anyone else's acts of omission or negligence. In addition, it is understood that any and all insurance that I have shall be primary.

To the fullest extent permitted by law, I shall **defend, indemnify and hold harmless**, New Day Ranch Inc. and M & A Schmidt LLC, it's directors, officers, agents, volunteers, or employees for and against any and all claims, damages, losses, expenses, and liabilities of any and every kind, including but not limited to attorney's fees, in any way arising out of or in connection with my activities under this Agreement. This indemnity shall apply regardless of any active or passive negligent act or omission of New Day Ranch Inc. and M & A Schmidt LLC, its directors, officers, agents, volunteers and employees.

I have carefully read this agreement and release and fully understand its contents. I am aware that this is a release of liability, a waiver of legal rights and contract between myself, and New Day Ranch Inc. and M & A Schmidt LLC, and sign it of my own free will. I further acknowledge that there are no warranties, either express or implied, concerning that facilities, events or activities at New Day Ranch Inc. and M & A Schmidt LLC.

Under Kentucky law, a farm animal activity sponsor, farm animal professional, or other person does not have the duty to eliminate all risks of injury of participation in farm animal activities. There are inherent risks of injury that you voluntarily accept if you participate in farm animal activities. Failure to comply with the requirements concerning warning signs and notices provided in this section shall prevent a farm animal activity sponsor or farm animal professional from invoking the provisions of KRS 247.401 to 247.4029.

Participant's Full Name:

(Please print)

Family Members (List anyone that could potential visit the program):

Street Address:

City/State/Zip:

Telephone: Cell phone:

Signature of Parent/legal guardian

Print Name

Date: