



Hidden Hills Ranch
FARM ACTIVITIES AND HORSEMANSHIP ACTIVITIES
Registration Form

Student's Name: _____ Date of Birth: _____ M / F

Student's Name: _____ Date of Birth: _____ M / F

Student's Name: _____ Date of Birth: _____ M / F

Student's Name: _____ Date of Birth: _____ M / F

Parent/ Guardian Name: _____

Address: _____ City/State: _____ Zip: _____

Cell Phone Number: _____ Home/Work Phone Number: _____

Email Address: _____ Best Form of Contact: _____

Parent/ Guardian Name: _____

Address: _____ City/State: _____ Zip: _____

Cell Phone Number: _____ Home/Work Phone Number: _____

Email Address: _____ Best Form of Contact: _____



Hidden Hills Ranch
FARM ACTIVITIES AND HORSEMANSHIP ACTIVITIES
MEDICAL RELEASE FORM
For: Educational Resources of Monterey County (ERMCO)
DBA: Hidden Hills Ranch

Student's Name: _____ Date of Birth: _____ M / F

List known allergies or medical conditions: _____

List known special needs or behavior concerns: _____

Student's Name: _____ Date of Birth: _____ M / F

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List known allergies or medical conditions: _____

List known special needs or behavior concerns: _____

Medical Insurance Information

Insurance Company: _____ Primary Subscriber: _____

Policy Number: _____ Group ID Number: _____

Primary Physician: _____ Phone Number: _____

Emergency Contact Information

Primary Emergency Contact: _____

Cell Phone Number: _____ Work/Home Number: _____

Secondary Emergency Contact: _____

Cell Phone Number: _____ Work/Home Number: _____

_____ (Initial) In the event of an emergency, I authorize ERMCO and/or Hidden Hills ranch to seek medical treatment for my child.

_____ (Initial) If I cannot be reached, Hidden Hills Ranch, ERMCO is authorized to transport my child to the nearest medical facility.

_____ (Initial) I agree to assume responsibility for the payment of all fees associated with any such emergency treatment.

_____ (Initial) I agree to keep Hidden Hills Ranch, ERMCO informed at all times of anywhere I or a preferred physician may be reached.

_____ (Initial) I agree to provide written authorization before any medications can be dispensed to a child.

Emergency Procedure Will Be:

1. Call emergency medical personnel if necessary. (9-1-1)
2. Contact Parent's / Guardian's _____
3. Contact Person (s) listed as Emergency Contact _____
4. Transport child via emergency medical personnel to the nearest hospital.

Parent/Guardian Name: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____



Hidden Hills Ranch
FARM ACTIVITIES AND HORSEMANSHIP ACTIVITIES
WAIVER AND RELEASE
For: Educational Resources of Monterey County (ERMCO)
DBA: Hidden Hills Ranch

Student's Name: _____ Date of Birth: _____ M / F

Student's Name: _____ Date of Birth: _____ M / F

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_____ (Initial) **WARNING: Horses, farm animals, and associated farm activities are potentially hazardous. Horses are big, strong, inherently dangerous animals which are unpredictable. While riding, visiting the premises, and/or engaging in related activities, you might fall, be kicked, bitten, stepped on, or otherwise injured by a horse, cow, goat, pig, cat, dog, fowl, or other farm animal. PLEASE DO NOT SIGN THIS FORM UNLESS YOU ARE WILLING TO ASSUME THE RISK OF INJURY or DEATH TO YOURSELF AND/OR YOUR FAMILY, GUESTS AND/OR DAMAGE TO YOUR/THEIR PROPERTY.**

In consideration of the use of these facilities as a guest, visitor or rider (all hereinafter referred to as **USER**) for participation in riding or related activities, whether with **USER's** own horse, **USER's** friend's horse, one provided for use by ERMCO and/or Hidden Hills Ranch or any other horse for the purpose of boarding, equitation lessons, horseback riding lessons, recreational riding, horse shows, horse lease, horse and farm animal viewing, and/or any other horsemanship or horse or farm related activity, the undersigned **USER** or (if under 18 years of age) **USER's** parent or legal guardian, intending to be legally bound, hereby waives and releases any and all rights and claims which hereafter may accrue to us, or any of us, against Mark and Gayle Comer, ERMCO, or Hidden Hills Ranch for any injury and/or property damage which may be sustained or suffered by **USER** in connection with such activities occurring on the premises, adjacent property or at horse shows or farm sponsored trips and/or while being hauled to or from such events.

This waiver and release is intended to discharge Mark and Gayle Comer and/or ERMCO and/or Hidden Hills Ranch and/or employees, volunteer helpers, and agents of all of them and each of them, and the adjacent property owners forever, from any liability to **USER**, **USER's** personal representatives, heirs and assignees arising out of **USE**.

USER's participation in such horsemanship and/or farm activities, and shall be binding upon the personal representatives, heirs and assignees of **USER**.

USER states that he/she understands that **horses and the other farm animals are inherently dangerous** and is physically able to participate in horsemanship and/or farm activities and is of lawful age and legally competent to sign this Waiver and Release or that this Waiver and Release has been signed on **USER's** behalf by **USER's** parent or legal guardian with whom **USER** has discussed his/her proposed activities.

Medical Consent: I hereby consent to ERMCO and/or Hidden Hills Ranch to authorize any medical or surgical care for myself or my child in case of a medical emergency, should such service be needed. I further understand that I am responsible for all costs associated with any such treatment.

Protective Headgear: I hereby agree that a SEI-ASM approved riding helmet, which fits properly with an attached harness will be worn for horse and pony lessons. A safety helmet will be provided to the student, unless he/she has her own approved safety helmet. A helmet must be worn by the student whenever mounted on a horse or pony.

Publicity Release -

Please check this box if you would like to opt-out of this publicity release.

I hereby authorize and give consent to ERMCO and/or Hidden Hills Ranch, its successors and assigns, to copyright, publish and display all photographs, and videos taken by them in which I or my son/daughter appears. It is further agreed that ERMCO and/or Hidden Hills Ranch may use, or cause to be used, my photographs, or images for any or all exhibitions, public displays, publications, flyers, brochures, commercial art, advertising purposes, and the ERMCO or Hidden Hills Ranch website, without limitations or reservations or any compensations.

Parent/Guardian (**USER**) Name: _____

Signature: _____ Date: _____

_____ (Initial) I have received a copy of and understand Hidden Hills Ranch Code of Conduct Policy.

_____ (Initial) I have received a copy of and understand Hidden Hills Ranch Rules.

_____ (Initial) I have received a copy of and understand Hidden Hills Ranch Tardy, Attendance, Cancellation, Attire, and Health and Wellness Policy.

Parent/ Guardian Signature _____ Date: _____

