



2021 Farm Camp Registration

Child's Name: _____

Home Phone: _____ Parent Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Date of Birth: _____ Age at Camp: _____ School: _____ Grade: _____

Gender: Male Female T-Shirt Size: Youth - S M L Adult - S M L XL

Mother/Guardian: _____ Cell Phone #: _____ Work #: _____

Father/Guardian: _____ Cell Phone #: _____ Work #: _____

Has your child attended farm camp before? If yes, how many years? _____

Does your child have any special needs or medical conditions that we need to be aware of for camp? _____

How did you hear about Hunt Club's Farm Camp? Newspaper Farm Visit Brochure Website TV Station School Friend Other: _____

Camp Sessions: Please put an X each week that you wish your child to participate. There will be a \$25.00 fee for all session changes from original application.

FARM CAMP	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Week 9	Week 10
All Day (Ages 6-12)	6/21-6/25	6/28-7/2	7/5-7/9	7/12-7/16	7/19-7/23	7/26-7/30	8/2-8/6	8/9-8/13	8/16-8/20	8/23-8/27

PLEASE NOTE: Camp is limited to children 6 to 12 years of age. Children may only enroll in a maximum of 5 weeks or 25 program days of summer camp.

Camp Fees: Includes Camp T-shirt & all crafts for each day of camp. **Please provide Lunch, a Snack and/or Canteen money daily.**

	Rate Calculations	Total Amount Due:	(Office Use Only)
Camp Session Rate:	\$350 x _____ # Weeks		
Early Registration Discount:	Before 12/31/2020 - \$25 x _____ # Weeks Before 04/5/2021 - \$10 x _____ # Weeks	(-)	
Multi-Session Discount:	- \$10 x _____ # Weeks	(-)	
Extra Camp T-shirt:	+ \$15 x _____ # Shirts	(+)	
Deposit (Required for each session reserved.)	\$100 x _____ # Weeks	(-)	
Balance Due: May 17, 2021		\$	

A deposit of \$100.00 is required per session. The deposit is NON-REFUNDABLE. Camp balances are due prior to May 17, 2021. Late payment of camp balance may result in the forfeiture of your reservation. You will receive a refund, minus deposit, if cancellation is made 30 days prior to the first day of your selected session. Cancellations within 30 days of session are Non-Refundable. There will be a \$25.00 fee for all session changes. NO AMEX

Payment Methods: Cash ___ Check ___ Credit Card ___ Card #: _____ Security Code: _____ (3 digits on Back of Card) Exp. Date: _____
Billing Zip Code: _____

Amount to be Charged: \$ _____ Authorized Signature: _____ Charge Balance 5/17/2021? YES NO

****Please Retain a copy for your Federal Income Tax - Child Care Deduction - Hunt Club Farm Tax ID # 541989562****

I, _____, hereby grant permission for Hunt Club Farm of Virginia Beach Inc. to use photographs of my child in print or online materials designed for news, informational, and/or advertising purposes.

Pick-Up Authorization: List the people who will pick up your child besides guardians listed above. Children will not be released to other people. Emergency password: _____

Name: _____ Relation: _____ Telephone: _____

Name: _____ Relation: _____ Telephone: _____

I certify the above information is correct and agree to the terms listed above in this registration application. I understand and am aware that my child will be participating in many physical activities and that the potential for accidents does exist. In consideration of acceptance to Hunt Club Farm's Summer Camp I indemnify and hold harmless Hunt Club Farm, its agents, associates, staff, and board of directors from any and all liability, claims, damage, injury or illness sustained by my child.

Parent Signature: _____ Date: _____

SUMMER FARM CAMP

2021 Medical Information: Parent to Complete

Camper's Name:	Date of Birth:	Age:	Weekly Session:
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Mother / Legal Guardian / Emergency Contact: Name and Telephone #:

Father / Legal Guardian / Emergency Contact Name and Telephone #:

MEDICAL HISTORY: Physical exam must be within one year of camp start date.

Last Exam Date:	Examined By:	Family Physician:
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Physician's Telephone #:	Physician's Address:
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Child's Height		Child's Weight		Emergency Password:
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Diabetes	Y	N	Epilepsy/Seizure	Y	N	Hypertension	Y	N	Autism/ Asperger's	Y	N	Hearing Loss	Y	N
Asthma/Respiratory Disease	Y	N	Ulcer/Stomach Disease	Y	N	Hemophilia/Bleeding Disease	Y	N	Hepatitis/Liver Disease	Y	N	Vision Issues	Y	N
Heart Disease	Y	N	Ear Infection	Y	N	HIV/AIDS	Y	N	ADD/ADHD or ODD	Y	N	DPT/Tetanus	Y	N
Kidney Disease	Y	N	Bowel Disorder	Y	N	Rheumatoid/Lupus	Y	N	Nervous/Mental Disorder	Y	N	Other		

Please Detail **YES** Remarks:

List all **Previous Surgeries/Major Injuries**:

List all **Allergies** (as well as Medication Allergies):

Allergic reactions to the following:	Food	Hay Fever	Poison Ivy	Poison Oak	Bee Stings	Animals	Other:
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Prescription Drugs: Written physician's directions including dosage, frequency and condition, **MUST** accompany any prescription medications sent to Camp. Medications:

Any other information that you would like to provide about your child's general health or special needs?

I understand that I will be contacted as soon as possible if my child is injured and in need of medical care. If I am not available, please contact:

Name:	Relation:
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Home #:	Work #:	Alt #:
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Name:	Relation:
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Home #:	Work #:	Alt #:
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In the event that I am unavailable for the purposes of providing parental consent, I hereby authorize the physician(s) and staff at the medical facility or hospital chosen by Hunt Club Farm to provide such care that includes diagnostic procedures and medical treatment as necessary to my minor child while said child is enrolled in Hunt Club's Summer Farm Camp. I also authorize the release of all x-rays, test results, lab work or any other procedure that would be helpful in the follow-up care of my child. This medical treatment is to be given to my child without any further prior permission from the undersigned. I understand that the consent and authorization herein granted does not include major surgical procedures.

I, the undersigned, authorize payment of medical benefits to such medical facility or hospital for any services furnished to my child by the physician. I understand that I am financially responsible for any amount not covered by my insurance contract. I also authorize you to release to my insurance company information concerning health care, advice, treatment or supplies provided to my child while attending Hunt Club's Summer Farm Camp. This information will be used for the purpose of evaluating and administering the claim of benefits. This consent is valid for one year from the date indicated. A photocopy of this authorization shall be considered as effective as the original.

_____ Parent/Guardian Signature	_____ Date
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SUMMER FARM CAMP

Camper Profile

Camper Name:

Week #:

Camper Section:

Which of the following things would you like to do?

Ride a horse?

YES

NO

Take a goat for walk on a leash?

YES

NO

Learn how to catch and hold a chicken?

YES

NO

Play with bunnies?

YES

NO

Get muddy with a pig?

YES

NO

Go fishing?

YES

NO

Meet new friends?

YES

NO

What is your favorite farm animal?

If you are a returning camper, what was your favorite part about camp last year?

Parent Section:

Please share any additional information about your child that may be helpful to our Staff:

**Hunt Club Farm's Summer Camp
Behavior Agreement**

I agree to follow the rules and behavior guidelines of Hunt Club's Summer Farm Camp. Program rules include, but are not limited to the following:

1. I will be respectful of my fellow Camp participants and all program staff. This means that I will speak to others in a respectful manner and tone of voice, I will follow directions and I will not cause or threaten physical harm towards others. I understand that disrespectful behaviors include, but are not limited to, hitting, punching, kicking, biting, spitting, swearing, lying and refusing to listen to camp & HCF staff.
2. I will be respectful of the HCF grounds and building, places we may visit, the animals and the belongings of others. This means that I will not litter, vandalize, steal or destroy items that do not belong to me. I will act in a behavior that will not give a negative image of myself or HCF.
3. I agree to follow all Camp rules including those that are not listed on this behavior agreement.

Camp Participants: With a parent, I have read the Hunt Club Farm Summer Camp Behavior Agreement and I agree to follow the rules. I understand that not following these rules will result in consequences to my actions. In some cases, consequences may include not being allowed at Camp for a period (1 day – the rest of the summer) or not being allowed to participate in certain activities.

Parents: By signing this document you are acknowledging that you have read and understand the rules listed above, that the consequences listed below may be imposed at any time, and that you will arrange for your child to be picked up from Camp if the camp staff requests for you to do so.

On or After the date listed with signature:

First Occurrence – The first time an incident happens will result in a phone call home. A Senior Staff Member will explain to parents what happened and that such behavior is not acceptable. In the case where kicking, biting, hitting or other severe behavior occurs, the child may automatically be given one day suspension from the program, with no refund for that day.

Second Occurrence – The second time an incident occurs will result in a second phone call home from a Senior Staff Member, most likely the Director. At least one day suspension may be given, if not more (with no refund) and it will be explained to the parent that the next occurrence will result in the child's expulsion without refund.

Third Occurrence – The third incident will result in immediate expulsion from Camp without refund. The Hunt Club Farm Summer Camp Director will make final determination for expulsion.

Print Name of Camper

Signature

Date

Print Name of Parent/Legal Guardian

Signature

Date

Thank you for your cooperation.

Summer Camp & Equine Activity Liability Release, Waiver of Right to Sue and Assumption of all Risks

For valuable consideration including the opportunities provided by Hunt Club Farm of Virginia Beach, Inc., t/a Hunt Club Farm its owners, employees and any volunteers, or others in anyway associated with Hunt Club Farm, I/we am aware that in addition to the usual dangers and risks inherent in equestrian activities, outdoor sports, animal care, fishing, arts and crafts, water activities and other activities at Hunt Club’s Summer Farm Camp, certain additional dangers and risks are present including but not limited to the danger and risk of being in direct contact with farm animals including birds, goats, sheep, cows, llamas, alpacas, rabbits, pigs and equines, being kicked, bitten or scratched, stepped-on, knocked-over, falling, failure of tack, harnesses and/or colliding with camp staff, campers or spectators or being exposed to animal related pathogens. By signing this waiver, I/we freely accept and fully assume responsibility for all such dangers and risks and the possibility of personal injury, death, property damage or loss resulting there from.

In consideration of utilizing Hunt Club of Virginia Beach, Inc. t/a Hunt Club Farm facilities and for other good and valuable consideration, I/we hereby agree as follows:

1. TO WAIVE ANY AND ALL CLAIMS for personal injury including death, illness, and/or property damage that I/we may have against Hunt Club of Virginia Beach, Inc., shareholders, partners, principals, directors, officers, affiliates, agents, employees, contractors, representatives and any volunteers in any way associated with Hunt Club of Virginia Beach, Inc., Summer Farm Camp, all of whom are herein collectively referred to as “the Releases.”

2. TO RELEASE THE RELEASEES FROM ANY AND ALL LIABILITY for any loss, damage, injury, death, medical or other expense that I/we may suffer or that any other party may suffer as a result of my use of Hunt Club facilities or by my participation in Summer Farm Camp or due to any cause whatsoever.

3. TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability for any property damage or personal injury to any third party resulting from my use of Hunt Club facilities or by my participation in the activities of horseback riding, water activities, animal care, gardening and other Summer Farm Camp activities.

4. THIS RELEASE OF LIABILITY SHALL BE EFFECTIVE AND BINDING upon my heirs, next of kin, executors, administrators, successors and assigns in the event of my personal injury including death, illness and/or property damage.

5. I/WE ADDITIONALLY AGREE not to take unreasonable risk while participating in horseback riding, water activities, animal care, gardening and other Summer Farm Camp activities, including but not limited to attempting skills or tricks that I am not qualified to perform safely or causing any other participants/spectators unreasonable risk of harm.

6. I/WE ADDITIONALLY AGREE that I/we shall follow correct safety procedures when using Hunt Club Farm’s facilities. I/we also expressly grant to the Camp, and any third party authorized by the Camp, the right to film, videotape, photograph, record my voice and make any reproductions of my physical likeness and voice, and the irrevocable right to perpetuity to use, display, and digitally enhance or alter in any manner, such likeness in any media now known or hereafter devised, including, but not limited to, the exhibition and/or online use, broadcast, theatrically or on television, cable or radio, of any motion picture film, video tape, DVD, CD or any Internet service or program in which such likeness may be used or otherwise, or any published articles in which such likeness may be used or otherwise, or any published articles in which such likeness may be printed, used or incorporated, and in the advertising, exploiting and publicizing of the Camp and Camp products.

I/WE HEREBY CERTIFY that I/we have read and understand this Release of Liability prior to signing it, and I/we am aware that by signing this Release of Liability I/we am waiving certain legal rights which I/we or my heirs, next of kin, executors, administrators, successors and assigns may have against the Releases.

Hunt Club shall have the right to impose any additional conditions which, in the opinion of the Releases, will further the intent and legal rights and waivers provided herein.

This Liability Waiver was made and executed in the State of Virginia and shall be governed by, enforced in and construed in accordance with the laws of the State of Virginia.

I/we acknowledge that in executing this Waiver, I/we are not relying on any inducements, promises, or representations made by the Releases.

If this Agreement is executed by the undersigned participant for and on behalf of a minor participant named below, the undersigned participant hereby warrants and represents that he is in fact the legal parent or guardian of such minor, with full rights of custody and control; that this Agreement is given on behalf of and is binding upon said minor participant, his heirs, personal representatives, successors and assigns; and the undersigned participant further agrees that his Agreement shall also be as fully binding on the undersigned participant as if it were entered into solely on his own behalf.

Camper’s Name

Print Name of Parent/Legal Guardian Signature

Signature

Date