

# HORSE DYNAMICS cc

Est. 2006

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Plot 39, c/o Lynnwood and Boschkop Road,  
Zwavelpoort, 0081 (*Riding school*)  
13 The Willows Lofts, 6 Bee Bee Str.  
Die Wilgers, 0041 (*Administration*)  
PO Box 71610, Die Wilgers, 0041

## Holiday Pony Camp 2011 Enrollment and Indemnity Form for Riders

A warm word of welcome to all our parents from the whole team at Horse Dynamics cc.

**INDEMNITY** (*Please complete, sign it and return a scanned copy by e-mail or alternatively fax*)

I, the undersigned, \_\_\_\_\_ (full names) in my capacity as parent or legal guardian

of the minor child \_\_\_\_\_ (full names),

rider's (child) birthday hereby 

d	d	/	m	m	/	y	y	y	y
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 agree as follows:

1. I acknowledge and accept that the dangers inherent in horse riding have been explained to me and I fully understand the nature of the risk and the need for the rider to take all reasonable precautions.
2. I accept and voluntarily assume the risk inherent in my child's participation in horse riding activities and I, together with my child's heirs, executors and administrators release The Yard, its officers, stewards, agents and representatives from any duty of care towards my child, in connection with his/her participation in horse riding, and from liability from all or any claims that could accrue to my child or his/her heirs, executors or administrators arising out of his/her participation in horse riding or any related activities, or of any loss of or damage to his/her property (whether physical, emotional and/or financial) from any cause whatsoever and I further indemnify and hold harmless associated person against any claims however the same may arise.
3. Such horse riding activities will include but not be limited to riding, working with horses on foot, generally being on the premises for the purpose of taking instruction or any other activity undertaken by participants during pony camp.
4. I acknowledge that any vehicle/property brought onto the premises is solely at my risk and The Yard will not be liable for any damage that may be caused to such vehicle/property as a result of any of the staff, horses or ponies while on the premises. I further acknowledge that animals may have reason to be in the same area as vehicles while on the property and that such action shall not be deemed to be negligent by The Yard in so far as I have been warned of such a situation.
5. I further acknowledge that no protective riding equipment is provided by The Yard and that use of such equipment, especially a protective helmet, is highly recommended. Should I wish my child to make use of such equipment it will be my responsibility to provide it. In the event that I do make use of riding equipment available at The Yard, The Yard management make no representations and give no warranty as to the suitability, effectiveness or fit of the said equipment, which is used solely at my child's own risk.

6. In the event of an accident involving my child there is no obligation on The Yard to secure for my child's medical treatment, however, I do hereby authorise The Yard to act in his/her best interest, which may include the obtaining of the necessary emergency medical treatment, which shall be for my account. In such an event, The Yard will advise the contact person listed herein of the situation at the earliest possible opportunity but is authorised to secure medical treatment without prior consultation.
7. Neither The Yard nor its staff shall be liable for any loss or damage to property brought to the yard, for example money, cell phones and clothing.
8. I agree that photographic and/or video material taken during activities may be used for training or marketing purposes.

[Please print clearly]

**ENROLMENT**

For official record-keeping and enrolment for 2011 only:

Parent/Guardian's ID Number:

Contact number (Mother):

Contact number (Father):

E-mail-address: \_\_\_\_\_

Contact person in case of emergency: \_\_\_\_\_

Relationship: 

Father	Mother	Guardian
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Contact number (Cell number):

Contact number (Tel number):

Medical aid Scheme: \_\_\_\_\_

Membership number: \_\_\_\_\_

Principal member: \_\_\_\_\_

Contact number:

School: \_\_\_\_\_

Thus done and signed at \_\_\_\_\_ on this \_\_\_\_ day of \_\_\_\_\_ 2011.

Signature: \_\_\_\_\_

[Please print clearly]

## **COST**

R 900-00 - include all activities, meals and snacks (5% discount for parents with two or more children)

**No cash payments will be accepted.** Submit proof of payment to us by faxing it to 086.655.3608 or e-mail it to info@horsedynamics.co.za. (Please refer to [www.horsedynamics.co.za](http://www.horsedynamics.co.za) for the most up-to-date contact information.)

### **EFT or direct deposits:**

Horse Dynamics cc  
FNB Cheque Account  
Branch name: Menlyn Square  
Branch code: 252445  
Account: 62124532161

Reference number: Important - Please use your mobile number since if we haven't yet allocated a client number to you.