



PLEASE READ CAREFULLY AND COMPLETE ALL SECTIONS BEFORE SIGNING.
FILL OUT ONE FORM *PER INDIVIDUAL* AND PRINT CLEARLY.

PARTICIPANT INFORMATION

First Name: _____ Last Name: _____

Birth Date: _____ Age as of June 1, 2022: _____ (If not between 8-14, contact EHG)

Participant is: Male Female Over 200 pounds
(Please check all that apply) Under 10 hours riding experience

Select Week Attending:

Week 1, May 30-June 3 Week 2, June 6-10 Week 3, June 20-24 Week 4, June 27-July 1

T-Shirt Size: _____

EHG T-Shirts must be worn each day of camp.

PARENT OR GUARDIAN INFORMATION

Father's Name: _____

Mother's Name: _____

Legal Guardian's Name: _____ (If different from parent listed above)

Legal guardians do not include babysitters or friends of the family unless that individual has been named guardian by a legal process. Signed notes are not considered "legal" documents of appointment.

SIBLINGS OR THOSE FROM SAME HOUSEHOLD ALSO

PARTICIPATING IN CAMP:

Home Address: _____

Phone Number: _____

Email Address: _____

Confirmations will be emailed, please list an email you will check regularly!

Years attended Enter His Gates Summer Camp: _____

Years taking riding lessons: _____ Riding lesson instructor: _____

Other riding experience: _____

MEDICAL INFORMATION:

Name of insured: _____ DOB: _____ Phone: _____

Physician's Name: _____ Preferred Medical Facility: _____

Health Insurance Company: _____ Policy Number: _____

Allergies: _____

Current medications: _____

Current Tetanus: Yes No

To your knowledge, is your child allergic to horse dander? Yes No

If your child will be bringing an inhaler, please describe its location and use:

Safety Question: Does this participant have any physical or mental condition(s) that may affect his/her safety and ability to ride a horse? _____

In the event of an emergency, contact:

Name: _____ Relation: _____ Phone: _____

Name: _____ Relation: _____ Phone: _____

Name: _____ Relation: _____ Phone: _____

MEDICAL CONSENT PLAN: In the event emergency medical aid/treatment is required due to illness or injury during the process of receiving services, or while being on the property of the agency, I authorize EHG to:

Secure and retain medical treatment and transportation if needed.

Release client records upon request to the authorized individual or agency involved in the medical emergency treatment

Consent Plan

This authorization includes x-ray, surgery, hospitalization, medication and any treatment procedure deemed "life-saving" by the physician. This provision will only be invoked if the person(s) above is unable to be reached.

Consent Signature: _____ Date: _____

Participant, Parent, or Legal Guardian

Non-Consent Plan

I do not give my consent for emergency medical treatment/aid in the case of illness or injury during the process of receiving services or while being on the property of the agency. In the event emergency treatment/aid is required, I wish the following procedures to take place:

Non-Consent Signature: _____ Date: _____

Participant, Parent, or Legal Guardian

In the case of minor injury (bumps and bruises) first aid will be administered by a staff member. Please list over-the-counter medications you authorize staff to give (such as ibuprofen).

SUMMER CAMP AGREEMENT: I, the above listed individual, hereinafter known as the “PARTICIPANT,” and the parents or legal guardians thereof if a minor, do hereby voluntarily agree to participate in all Enter His Gates activities including horse riding as a student of EHG, and that if I ride a horse provided by EHG, I will do so for instruction purposes. I also affirm that I have read and understood the ground rules provided to me and agree to abide by them.

AGREEMENT SCOPE AND TERRITORY AND DEFINITIONS: By signing below I am agreeing that this agreement shall be legally binding upon me, the registered PARTICIPANT, and the parents or legal guardians thereof if a minor, my heirs, estate, assigns, including all minor children, and personal representatives; and it shall be interpreted according to the laws of the state and county of EHG’s physical location. This agreement is intended to be valid and binding at all times now and in the future when EHG permits me (directly or indirectly) to enter EHG’s property, be on EHG’s property, be near any horse, receiving riding and/or training instruction or guidance from its associates and/or when I ride and/or train and/or am near horses on or off of EHG’s property, including any activity involving the horse-drawn cart, whether the cart is hitched to horses at the time or not, any disputes by the PARTICIPANT shall be litigated in and venue shall be the county in which EHG is physically located. This agreement is intended to be as broad and inclusive as the law permits. If any clause, phrase, or word is in conflict with state law, then that single part is null and void. This agreement is to remain in effect for 12 months following the date signed by the PARTICIPANT or their legal guardian if a minor. The term “HORSE” and “EQUINE” herein shall refer to all equine species. The terms “I” “WE” “ME” and “MY” shall herein refer to the above registered participant and the parents or legal guardians thereof if a minor.

PROTECTIVE HEADGEAR/HELMET WARNING: I/WE agree that for myself and on behalf of my child and/or legal ward have been fully warned and advised by EHG that protective headgear/helmet, which meets or exceeds the quality standards of the SEI CERTIFIED ASTM STANDARD F 1163 Equestrian Helmet, should be worn while riding and/or driving and/or training and/or being near horses, and I understand that the wearing of such headgear/helmet at these times may reduce severity of some of the wearer’s head injuries and possibly prevent the wearer’s death from happening as the result of a fall or other occurrences.

INHERENT RISKS/ASSUMPTIONS OF RISKS: I/WE acknowledge that risks, conditions, and dangers are inherent in (meaning an integral part of) horse/equine/animal activities/stable activities, regardless of all feasible safety measures which can be taken and I agree to assume them. The inherent risks include, but are not limited to any of the following: the propensity of an animal to behave in ways that may result in injury, harm, death, or loss to persons on or around the animals; the unpredictability of an equine’s reaction to sounds, sudden movement, unfamiliar objects, persons, or other animals; hazards, including, but not limited to, surface or subsurface conditions; a collision, encounter and or confrontation with another equine, another animal, a person, or an object; the potential of an equine activity participant to act in a negligent manner that may contribute to injury, harm, death, or loss to the participant or to other persons, including but not limited to: failing to maintain control over an equine and/or failing to act within the

ability of the participant. I would like the participant listed above to participate in the EHG program. I acknowledge that I am aware of the risks and potential risks of working with horses. However, I feel that the possible benefits to my son/my daughter/my ward are greater than the risk assumed. I hereby, intending to be legally bound for myself, my heirs and assigns, executors or administrators do waive and release forever all claims for damages against EHG, its Board of Directors, Instructors, Therapists, Aides, Volunteers, landowners and employees for any and all injuries or losses my son/my daughter/my ward may sustain while participating in the EHG program.

EQUINE ACTIVITY LIABILITY ACT WARNING OR LANGUAGE: I/We acknowledge to have reviewed this state's EQUINE ACTIVITY LIABILITY ACT WARNING "UNDER OKLAHOMA LAW A LIVESTOCK ACTIVITY SPONSOR, A PARTICIPANT OR A LIVESTOCK PROFESSIONAL ACTING IN GOOD FAITH SHALL NOT BE LIABLE FOR INJURIES TO ANY PERSON ENGAGED IN LIVESTOCK ACTIVITIES WHEN SUCH INJURIES RESULT FROM THE INHERANT RISKS OF LIVESTOCK ACTIVITIES." (OKLAHOMA STATUTES TITLE 76-50)

Signature: _____ Date: _____
Participant, Parent or Legal Guardian

PHOTO/VIDEO RELEASE: I hereby DO consent
 DO NOT consent

To and authorize the taking, use and reproduction of any and all photographs, videos and other audiovisual materials taken by EHG staff/volunteers (or someone acting on behalf of EHG) of me/my son/my daughter/or ward for promotional material, educational activities or any other use for the benefit of the program.

Signature: _____ Date: _____
Participant, Parent or Legal Guardian

INCLEMENT WEATHER, TRANSPORTATION, AND ALTERNATE ACTIVITIES: In the event that inclement weather occurs, alternate activities may be held indoors or a sheltered area. In consideration that my child may be provided transportation to and from EHG or an alternate activity, I/WE hereby release and waive any and all claims against EHG, privately owned vehicle owners/operators, and their employees, agents, representatives, or volunteers arising from my child's transportation or participation in alternate activities as described above.

STATEMENT OF AWARENESS: I/WE, the undersigned, represent that I/WE have read and do understand the foregoing agreements, liability release and assumption of risk agreements. I/WE understand that by signing this document, I/WE give up rights to pursue litigation at any time unless proven negligence on the part of EHG. I/WE attest that all information provided is true, accurate and complete. I/WE verify that we are signing this while of sound mind and not suffering from any mental debilitation, shock, or under the influence of alcohol, drugs, intoxicants or other mind-altering substance.

Signature: _____ Date: _____
Participant, Parent or Legal Guardian

Please make payment to Enter His Gates. If application is received before May 10th, cost is \$175. If received after May 10th, cost is \$200. Deadline for application is May 28, 2022. If received after that date, you may be put on a waiting list and will not be guaranteed a camp t-shirt and water bottle. Confirmations will be emailed when your application is received. Scholarship applications found on our website.

INFORMED CONSENT 2022 AND RELEASE/INDEMNITY/HOLD-HARMLESS AGREEMENT

Cummins Facility and Swimming Pool

Waiver of Liability: The Cummins hereby declare their pool to be available to one Enter HIS Gates, and whatever children deemed appropriate to enter, swim in the pool, or sit by, aforementioned pool. No running in the pool and no diving in the pool is permitted. In consideration of myself and/or my minor child(ren) being permitted to swim, and -/or using the facility on the property of Rob and Daneille Cummins, 4 Westwood Rd., Enid, Ok. 73703, or at any event participant attends or competes in/on the Cummins's property, their agents or assigns, I hereby—for myself, my heirs, and personal representatives—assume any and all risks that might be associated with these activities. I further waive, release, discharge and covenant not to sue, and to hold harmless and indemnify Rob and Daneille Cummins, their officers, directors, volunteers, employees, agents or assigns or successors, from any liability or responsibility for accident, damage, injury, illness, or death suffered by myself and/or my minor child(ren), or to any family member or guest accompanying myself and/or my minor child(ren) onto the premises or to an event.

STATEMENT OF AWARENESS. I/WE, THE UNDERSIGNED, REPRESENT THAT I/WE HAVE READ AND DO UNDERSTAND THE FOREGOING AGREEMENTS, LIABILITY RELEASE AND ASSUMPTION OF RISK AGREEMENTS; I/WE UNDERSTAND THAT BY SIGNING THIS DOCUMENT, I/WE GIVE UP RIGHTS TO SUE TODAY AND IN THE FUTURE. I/WE ATTEST THAT ALL FACTS ARE TRUE AND ACCURATE. I/WE ARE SIGNING THIS WHILE OF SOUND MIND AND NOT SUFFERING FROM SHOCK, OR UNDER THE INFLUENCE OF ALCOHOL, DRUGS OR INTOXICANTS.

Signature: _____ Date: _____
Participant, Parent or Legal Guardian

SUMMER CAMP AGREEMENT: I, agree the above listed individual herein after known as the "Participant.", and the parents or legal guardians there of if a minor, do here by voluntary agree to participate in **all EHG activities**-- horse riding as a student of EHG, and that if I ride a horse provided by EHG, I will do so for instruction purposes (I will be under instructions in all other activities: swimming, canoeing, archery, gun safety (air guns), crafts, nature, games, dog handling, fishing, Bible study, lunch, riding in bus, picture taking , hiking, general activities of EHG summer camp and activities for one year under EHG.) I affirm that I have read and understand the ground rules provided to me and agree to abide by instructions in each area. Activities in **Enter His Gates** given as part of camp program.

Signature: _____ Date: _____
Participant, Parent or Legal Guardian

Behavior and Dress Code Agreement

Campers at Enter His Gates Summer Camp are asked to maintain a respectful, safe, and encouraging attitude. In addition to this, we have a dress code to ensure safety of all involved. Please review the following with your camper *before* camp starts and sign below. Our behavior policy is as follows: 1. Spoken warning by volunteer/counselor. 2. Warning by session leader. 3. Conversation with camp director. If the behavior goes so far as to warrant a discussion with the director, your child has chosen to stay home the next day of camp. If the behavior continues, he/she has chosen to stay home again. Parents will be notified if the situation arises.

Dress Code and Rules

- *Jeans*: While in the horse rotation, campers must wear long pants, preferably jeans. Slick pants such as sweatpants tend to slide around in the saddle and are a safety hazard. If a camper chooses to wear shorts during the riding rotation, they will not be allowed to ride.
- *Shorts* may be worn in other activities. Please aim for around fingertip length for both males and females. Don't forget jeans to change into for riding.
- *Shoes*: Closed-toed shoes are required for camp. This is a safety concern. Campers are encouraged to bring their own boots, but boots will be provided for campers who do not own boots. Boots must have a 1-1.5 cm heel and not be steel-toed. Campers may be asked to change boots if their boots are deemed unsafe for riding.
- *Shirts*: Enter His Gates t-shirts are required to be worn each day. Shirts from previous years can be worn as well. This is a safety concern and helps us identify campers as well as promote fellowship.
- *Swimsuits*: Please be respectful of all family mindsets. Girls, please wear one-piece swimsuits or a colored t-shirt over a two-piece. Boys, no speedos. Please bring a towel. Some campers like to bring sandals.
- *No abusive, threatening, or violent behavior* will be tolerated on the premises
- *Bullying* will absolutely not be tolerated
- Campers must *stay with their group* at all times unless given permission by a volunteer
- No tobacco, smoking, alcohol, or illegal drug use
- No camper is allowed to be in proximity of the horses unless a volunteer is present
- Campers must be supervised at all times
- No running, screaming, or "horseplay" is allowed around the horses
- Every person who steps foot on the property *must* have a signed and dated release form
- All campers must wear a riding helmet while near, around, or on the horses and must wear appropriate riding boots
- *No damage* to camp, church, or vehicular property
- *Absolutely no phones, ipods, etc.* allowed on the bus or at camp. Any communication with parents should be through EHG staff.
- No swimming or playing in ponds.

By signing below, you are agreeing to the behavior policy and acknowledging that you have discussed the rules above with your camper. We want all campers to have a safe and fun experience at camp.

Signature: _____

Participant

Date: _____

Signature: _____

Parent or Guardian

Date: _____

Completed by EHG staff only:

Application Complete and Signed: _____ Week Attending: _____

Medical Information Provided: _____ Consent Plan Signed: _____

Photo Release Signed: _____ Pool Release Signed: _____

Ranch Release Signed: _____ Camp Fee Due: _____ Amount Paid: _____

Cash: _____ Check: _____ Money Order/Cashier's Check: _____