

INDIANA 4-H HORSEMANSHIP CAMP

JUNE 15-19, 2009

HENDRICKS COUNTY FAIRGROUNDS, DANVILLE, INDIANA

The Indiana 4-H Horsemanship Camp is for Indiana 4-H members who are at least 12 years of age as of January 1, 2009. Campers bring their own horse or pony to camp, which will be at the Hendricks County Fairgrounds in Danville, Indiana. Campers will arrive mid-day on Monday, June 15th and will depart on Friday afternoon, June 19th.

Emphasis will be placed on showmanship at halter, western horsemanship, and hunt seat equitation.

Applications will be accepted through May 22, 2009. If the camp fills before May 22nd, applications will be held in the order received to fill cancellations made no later than May 23rd. The registration acceptance deadline will be May 22, 2009.

CAMP FEE: The total fee is \$350.00. A deposit of \$250.00 must accompany the application. *The deposit will be refunded if cancellation is made NO LATER THAN May 22, 2009.* The balance of the camp fee, along with a separate \$50 stall deposit, is due upon arrival at camp. The stall deposit will be refunded before departure on Friday, June 19th, providing that your stall has been completely cleaned out and passes inspection by the camp staff.

SCHOLARSHIP AVAILABLE: An application for the Mike Lancaster 4-H Horsemanship Camp Scholarship is attached. This opportunity is for any 4-H member who has not previously attended this camp. The applications for both the camp and the scholarship **must be received by May 1, 2009.**

INSTRUCTION: The camper/instructor ratio is kept to a low level and instructors are selected for talent, experience, and ability to relate to the campers' needs. Campers ride approximately five hours per day. Two hours each day will consist of non riding class work covering such topics as training, nutrition, judging, show preparation, and equipment. Class instructors will be the camp staff and guest speakers or demonstrators in cooperation with the Purdue Animal Sciences Department. Video tape is also used as a teaching tool.

HORSE OR PONY: Animals used at camp do not necessarily need to be the camper's 4-H project animal. If a horse or pony is injured or otherwise unsuitable for use at camp, we encourage the substitution of an animal whose condition and/or training will enable the camper to benefit more from this learning experience. *Camp is not a place for very young or green horses. No stallions permitted, of course.*

Animals must be sound, healthy, and in good condition. *We ask that all animals have current inoculations and recommend a flu/rhino booster in mid-May.* A veterinarian or farrier will be called for **EMERGENCIES ONLY.**

We recommend that horses be shod, preferably 10 days to 2 weeks prior to camp. We do not have a farrier on staff. A lost shoe or sore-footed horse can lose precious time for the camper until a farrier is obtained.

CONTINUED ON REVERSE SIDE

HOUSING FACILITIES: Campers will sleep in building with concrete floors. Cots or thick mattresses will be necessary.

All meals will be catered. Campers may bring snacks, but no ice or refrigeration will be available.

All activities will take place on the grounds of the Hendricks County Fairgrounds. Campers will not be permitted to leave the grounds at any time, *NOR WILL VISITORS BE PERMITTED. THOSE WHO APPEAR WILL BE ASKED TO LEAVE. SECURITY AND SAFETY ARE MAJOR CONCERNS.*

FEED, BEDDING, AND EQUIPMENT: Campers will provide their own horse, grain, hay, bedding, tack, grooming and stall cleaning equipment, and containers for feed and water in the stall.

Horses will be stabled in box stalls. Stalls will be pre-assigned. Campers who will be sharing equipment and wish to stall together **MUST** request this in writing on the original application. Stalls must be bedded with sawdust or shavings. No other bedding material is permitted. All stalls are on concrete. We recommend plywood, insulated sheathing board, or rubber mats, under at least four bales of shavings for initial bedding, and at least one additional bale to be added mid week. If you do not use a floor liner under the shavings, we suggest a minimum of six bales of shavings, with an extra bale for use mid week.

Campers are expected to be able to feed their own animals, keep the stall clean, and otherwise care for and control their animals. Campers should also be capable of saddling and bridling without assistance. Staff members and instructors are always available to help with any problems and to check equipment.

FOR ADDITIONAL INFORMATION:

Kay Lancaster

11985 E St Rd 32

Zionsville, IN 46077

317-896-2749 home, 317-769-2460 office

NOTE: Camp applications must be received at above address by May 22, 2009. Applications are considered to be received only when complete, signed, and accompanied by a deposit and a signed liability waiver.

Scholarship applications must be received by May 1st. Applicants will be notified of recipients selected before May 20, 2009.

INDIANA 4-H HORSEMANSHIP CAMP APPLICATION

NAME _____ BOY/GIRL _____

ADDRESS _____ CITY/ZIP _____

PHONE (____) _____ COUNTY _____

(where you are enrolled in 4-H)

BIRTHDATE ____/____/____ NUMBER OF YEARS IN 4-H _____

COUNTING THIS YEAR, NUMBER OF YEARS AT THIS CAMP _____

Campers must choose to ride one style for the entire week. Which group will you be working with?
Circle one:

WESTERN

HUNT SEAT (JUMP?)

In accordance with 4-H policy, ALL campers are required to wear an ASTM/SEI standard F1163 (or above) certified equestrian helmet whenever mounted.

NAME OF PARENT OR GUARDIAN AT ADDRESS ABOVE _____

ADDITIONAL PHONE NUMBERS FOR PARENT/GUARDIAN _____

ANOTHER PERSON TO CONTACT IN EMERGENCY _____

Relationship _____ PHONE _____

Will you need to be stalled with another camper? If so, with whom? _____

DEPOSIT: A deposit of \$250.00 must accompany this application. The balance of the \$350.00 camp fee, along with a separate \$50 stall deposit, may be paid upon arrival. The deposit check should be payable to "4-H Horsemanship Camp". **Cancellations made NO LATER THAN May 22nd** will allow refund of the \$250.00 deposit or the total camp fee if paid.

If this is your first year at camp, you are eligible to apply for a 4-H Horsemanship Camp scholarship. A limited number of scholarships are awarded, and those recipients will have the balance of the camp fee waived. A scholarship application is attached. These must be received by May 1st.

A card will be sent upon receipt of application and deposit. A letter will be sent in May with directions, "what to bring", and other information.

PLEASE READ OTHER SIDE CAREFULLY AND OBTAIN REQUIRED INFORMATION AND SIGNATURES!!

MAIL APPLICATION TO: Kay Lancaster
11985 E St Rd 32
Zionsville, Indiana 46077

4-H CAMP APPLICATIONS MUST BE RECEIVED BY MAY 22, 2009

INFORMATION TO BE PROVIDED BY PARENT OR GUARDIAN

4-H CAMPER'S NAME _____

HEALTH HISTORY: Please note any physical condition, including allergies, that the camp staff should know about. Reporting such conditions will not prevent a 4-H member from attending camp and will be kept confidential by the staff. Please also inform staff of medications being taken, and whether supervision for these medications is needed.

Date of last tetanus immunization _____

PLEASE READ THE FOLLOWING PARAGRAPHS CAREFULLY BEFORE SIGNING. THIS APPLICATION WILL NOT BE ACCEPTED WITHOUT SIGNATURES REQUESTED BELOW.

My child has my permission to attend the Indiana 4-H Horsemanship Camp. I understand that first aid will be available at the camp, that the campers will be supervised, and that if a serious illness or injury develops, medical and/or hospital care will be given. I further understand that the camp staff is not responsible in case of accidental injury or illness, and that in case of serious injury or illness I will be notified. If it is not possible to contact me, I give my permission for emergency treatment or surgery as recommended by attending physicians. I further agree that I will be responsible for payment of any charges incurred for treatment and care of my child.

Signature of parent/guardian _____ Date _____

Family physician's name _____

Office phone _____ City _____

Health insurance carrier _____

ID or policy number _____

Name of principal insured _____

Social security number of principal insured _____

I authorize the camp staff to give my animal assistance and support in case of injury or illness. I agree that, if in the opinion of the staff, a veterinarian is needed, a veterinarian may be summoned. I further agree that I will be responsible for the payment of charges incurred for a veterinarian's services.

Signature of ADULT responsible for animal _____ Date _____

Regular veterinarian's name _____ Phone _____

APPLICATION MUST BE ACCOMPANIED BY SIGNED LIABILITY WAIVER

**THIS SIGNED LIABILITY WAIVER MUST ACCOMPANY
THE CAMP APPLICATION!!!**

MINOR WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in the Indiana 4-H Horsemanship Camp at the Hendricks County Fairgrounds in Danville, Indiana, the undersigned:

1. Agree that the parent(s) and/or legal guardian(s) and the minor participant should inspect the facilities to be used prior to bedding down their horse and unpacking their gear, and if they believe anything is unsafe they should immediately advise the camp staff of such condition(s) and refuse to participate.
2. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions or negligence, but the action, inaction or negligence of others, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
3. Assume all the foregoing risk and accept personal responsibility for the damages following such injury, permanent disability or death.
4. Release, waive, discharge and covenant not to sue the Indiana 4-H Horsemanship Camp, the Hendricks County Fair Board, the Hendricks County Commissioners, or any of their respective administrators, directors, staff members, or employees, other participants, or sponsoring agencies, from any and all liability to each of the undersigned, his or her heirs and next of kin for any and all claims, demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of any of the above listed.

I/WE HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT WE HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.

Parent or Guardian (signature/relationship) Date

Parent or Guardian (signature/relationship) Date

Printed Name of Parent or Guardian _____

Printed Name of Participant _____

Address _____ CITY/ZIP _____

INDIANA 4-H HORSEMANSHIP CAMP MIKE LANCASTER SCHOLARSHIP APPLICATION

NAME _____ COUNTY _____

(where you are enrolled in 4-H)

ADDRESS _____ CITY/ZIP _____

PHONE (____) _____

BIRTHDATE ____/____/____ GRADE _____ YEARS IN 4-H _____ YEARS IN HORSE & PONY _____

GENERAL INFORMATION:

4-H members who have not previously attended this state 4-H Horsemanship Camp are eligible. Available scholarships are limited in number.

Applicants must complete this form **using a black ink pen** and attach it to the regular camp application, including the necessary deposit. **The scholarship application must be received by May 1, 2009.**

Scholarship recipients will be notified by May 20, 2009. The remainder of the camp fee will be paid by the scholarship fund. Recipients will also be recognized during the camp.

PLEASE RESPOND TO THE FOLLOWING QUESTIONS, USING ONLY THE SPACE PROVIDED. THIS FORM OR A PHOTOCOPY MUST BE USED. NO COMPUTER OR WORD PROCESSOR RECONSTRUCTIONS WILL BE ACCEPTED.

1. How old is the horse or pony you will bring to camp? Describe its abilities and level of training.

2. Describe the health care you have given this animal during the past twelve months.

3. Explain your personal responsibilities in the daily care and maintenance of this animal.

