

Salko Farm and Stable Lesson Packet



Includes :

- Waiver
- Medical Form
- Rates & Policies

**RELEASE OF LIABILITY
SALKO FARM & STABLE, LLC
374 HULLS FARM ROAD
SOUTHPORT, CT 06890**

I, _____, hereby acknowledge that I understand that equine activities are
[RIDER'S NAME]

hazardous by nature, with inherent risks and dangers that could result in serious injury or death. Such injuries or death can result from a number of causes, including, without limitation, collisions with or falls caused by other horses or riders, trees, rocks and other natural and man-made obstacles, whether they are obvious or not. I further understand that horses, even the most well-trained, can be unpredictable.

I and my family, including any minor children, willingly assume the risk of injury or death or damage to personal property to me or any member of my family, including any minor children, that may occur due to equine activities conducted on or about the premises of Salko Farm & Stable, LLC, unless the injury was proximately caused by the negligence of Salko Farm & Stable, LLC in providing the horse or horses to the individual engaged in recreational equine activities or the failure to guard or warn against a dangerous condition, use, structure or activity by Salko Farm & Stable, LLC or its agents or employees.

In consideration of and as a part payment for the right to participate in the equine activities associated with Salko Farm & Stable, LLC, I agree that I and my family, including any minor children, are in good health with no physical defects or ailments that would increase the risk of injury to us and that I and my family, including any minor children, are able to handle the hazards associated with equine activities.

As lawful consideration for being permitted by Salko Farm & Stable, LLC to participate in equine activities, I **release from any legal liability** Salko Farm & Stable, LLC, and all of their officers, members, agents and employees for any and all injury, death or damage to personal property caused by or resulting from equine activities associated with Salko Farm & Stable, LLC unless the injury was proximately caused by the negligence of Salko Farm & Stable, LLC in providing the horse or horses to the individual engaged in recreational equine activities or the failure to guard or warn against a dangerous condition, use, structure or activity by Salko Farm & Stable, LLC or its agents or employees.

I further agree not to sue, claim against, attach the property of or prosecute Salko Farm & Stable, LLC or any of its officers, members, affiliated organizations, agents and employees for injury, death or damage to personal property caused by or resulting from equine activities associated with Salko Farm & Stable, LLC unless the injury was proximately caused by the negligence of Salko Farm & Stable, LLC in providing the horse or horses to the individual engaged in recreational equine activities or the failure to guard or warn against a dangerous condition, use, structure or activity by Salko Farm & Stable, LLC or its agents or employees.

I agree to defend, indemnify and hold harmless Salko Farm & Stable, LLC and all of their officers, members, affiliated organizations, agents and employees for any injury, death or damage to personal property caused by or resulting from equine activities associated with Salko Farm & Stable, LLC unless the injury was proximately caused by the negligence of Salko Farm & Stable, LLC in providing the horse or horses to the individual engaged in recreational equine activities or the failure to guard or warn against a dangerous condition, use, structure or activity by Salko Farm & Stable, LLC or its agents or employees.

This release shall be legally binding upon me, my heirs, my estate, assigns, legal guardians and my personal representatives.

I have carefully read the agreement and fully understand its contents. I am aware that I am releasing certain legal rights that I otherwise may have pursuant to Connecticut General Statute § 52-557p or otherwise, and I enter into this contract on behalf of myself and/or my family of my own free will.

Should any injury occur due to equine activities, I authorize Salko Farm & Stable, LLC and its owners, officers and employees or other representatives to seek medical attention for me.

My medical doctor is _____
My medical doctor's telephone number _____
My medical insurance carrier is _____ **
My medical insurance policy number is _____
Emergency Contact _____

THIS IS A RELEASE OF LIABILITY. DO NOT SIGN OR INITIAL THE RELEASE IF YOU DO NOT UNDERSTAND OR DO NOT AGREE WITH ITS TERMS.

Participant Signature or
Parent or Guardian Signature
(if participant is under 18 years of age)

Date

Witness

Date

**I do not have medical insurance, but hereby agree that I have sufficient funds to pay costs of my own medical care.

Participant Signature or
Parent or Guardian Signature
(if participant is under 18 years of age)

Date

Witness

Date

Emergency Contact

Child's Name

Date of Birth

Parent's/Guardian's Name

Parent's/Guardian's Name

Home Phone

Work Phone

Home Phone

Work Phone

Cell Phone

Cell Phone

E-Mail

E-Mail

Address

City, ST ZIP Code

City, ST ZIP Code

Alternative Emergency Contacts

Primary Emergency Contact

Secondary Emergency Contact

Home Phone

Work Phone

Home Phone

Work Phone

Address

Address

City, ST ZIP Code

City, ST ZIP Code

Medical Information

Physician's Name

Phone Number

Insurance Company

Policy Number

Allergies/Special Health Considerations

I authorize all medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures as may be performed or prescribed by the attending physician and/or paramedics for my child and waive my right to informed consent of treatment. This waiver applies only in the event that neither parent/guardian can be reached in the case of an emergency.

Salko Farm & Stable LLC
374 Hulls Farm Road
Southport, CT 06890
203.255.5092
www.salkofarmandstable.com
email: salkofarmandstable@hotmail.com

1. Please email salkofarmandstable@hotmail.com to schedule a day and time for your lesson. This will be your time every week.

2. We strictly enforce a 24 hour cancellation policy – ESPECIALLY DURING SCHOOL BREAKS – since we have so many riders from so many different schools, it is up to each parent to cancel during their school breaks – NO EXCEPTIONS!!!! Additionally, a rider is only allowed 1 LATE cancellation every 6 months, otherwise we can not hold your weekly lesson time.

3. THE ONLY WAY TO CANCEL A LESSON IS TO EMAIL salkofarmandstable@hotmail.com. NO OTHER CANCELLATIONS WILL BE ACCEPTED – NO EXCEPTIONS!!! DO NOT TELL YOUR INSTRUCTOR OR CHRIS -- if you do so, you will be charged for the lesson.

4. We require that everyone pay per session (cash or check). All lessons MUST be used within the session dates. If lessons are not made-up within the session all remaining lessons will be forfeited.

Please Note: If a rider's payment is 3 lessons late, they will be taken off the schedule and lose their lesson time. Their time will be offered to a person on the Wait List.

5. After a session is completed, the majority of our students ride all year long, so we will assume that you are keeping your lesson time. BUT, if you do stop riding you must notify by email, otherwise you will continue to be charged. Our spaces are limited; so should you decide to stop riding we cannot guarantee that your riding time, if any, will be available at a later date.

Our rates are as follows:

Lesson Type	Price per Lesson	Price Per Session (12 Lessons)
Private ½ hour	\$90	\$1,020
Semi-Private 1 hour	\$110	\$1260
Private 1 hour	\$150	\$1740
Group 1 hour	\$95	\$1080
Intro to Riding (3-5 yr olds only)	\$75	\$840

(*PLEASE NOTE THERE IS A \$35 RETURNED CHECK CHARGE)**

8. All riders must wear an ASTM approved safety helmet, long pants or chaps and hard shoes (ankle paddock boots or field/dress boots). Sneakers and Hiking Boots are not permitted. These rules are strictly for safety, as it is far too dangerous to ride without proper footwear and helmet.

9. We are closed on major holidays, i.e., New Years Day, Easter, Memorial Day, 4th of July, Labor Day, Thanksgiving and Christmas. All dates are listed on our website salkofarmandstable.com

10. The barn is open Monday, Tuesday, Wednesday, Thursday, and Saturday. No Lessons are held on Friday or Sunday

Salko Farm and Stable

Policies

* NEW STUDENTS

New students are required to take a private 1/2 hour lesson to assess their riding ability. A separate waiver is required for each rider. An up to date waiver must be on file before any lesson occurs. All riders must wear ATSM approved helmets, and riding boots which are available free of charge for a new student for their first lesson only.

* INSTRUCTORS

Salko Farm reserves the right to substitute a comparable instructor without prior notification.

* CANCELLATION POLICY

In order to cancel a lesson, clients must email the company email address - salkofarmandstable@hotmail.com at least 24 hours prior to your scheduled lesson. **Please be aware that lessons cancelled less than 24 hours prior to your lesson time and “No Shows” will be charged in full. No make up lessons will be scheduled.**

* INCLEMENT WEATHER

Lessons are as scheduled unless you are notified by Salko Farm. We will email you if riding lessons are cancelled for that day.

* PAYMENT POLICY

We accept checks made payable to Salko Farm and Stable LLC, or cash. We do not accept credit cards.

* SEASONAL RIDING SESSIONS (SCHEDULING)

Our seasonal riding sessions have a duration of approximately 12 weeks. **To reserve a weekly lesson time slot, whether private, semi-private, or group, a full payment for the entire session is required before the first weekly lesson of the seasonal session occurs.** All scheduling is done via email. Again, if you mention to your instructor that you will be missing a lesson, please also email the office. Scheduling happens on a ‘first come first served’ basis. When the email is sent with a few suggested time slots for you or your child, these spots are not guaranteed to remain available.

I understand and accept the above stated Salko Farm and Stable policies.

Name:

Date:
