

Riding Application -Independent

Welcome to STAR Therapeutic Equestrian Center! We have over 20 years of experience enhancing quality of life for children and adults of all cognitive, physical, and social abilities.

Our minimum age is 6 years old to be considered for our riding program, and our maximum weight we can accommodate for horse safety reasons is 230 lbs.

STAR Therapeutic Equestrian Center operates year-round. There are horse vacation weeks approximately every 8 weeks. There will be no lessons during these weeks.

Fees for lessons are dependent on session format (group or private) and commitment to an entire session vs the occasional lesson. Fees are listed on our enrollment packets reflecting the total for a 4-week session.

Application Process:

- 1. Read and understand enrollment packet Participant Program and Payment Guidelines.
- 2. Complete and submit entire enrollment packet. Packets are not considered complete until all forms are returned and signed correctly.
- 3. Each applicant will be individually screened for precautions and contraindications; further information may be requested.
- 4. The applicant must be able to partially assist in their mounting and dismounting, balance and trunk control.
- 5. You will be contacted to schedule an initial assessment once your enrollment packet is reviewed. An assessment is not required for recreational riding.
- 6. After assessment is completed, Equestrian Services Manager and Instructor will determine if Equine Therapeutic Riding is appropriate for the potential participant and if so, which program and lesson day/time best meets the participant's needs. The instructor will contact you to schedule.

Therapeutic Riding Prices 2024

I am registering for the following class type:

Inde	pend	ent/R	ecreat	ional
------	------	-------	--------	-------

(can ride unassisted without side walker(s) or leader, mount, and dismount with minimal help/mounting block)

Private 1 Hour Lesson	\$240.00/4 weeks
Group (2 or more) 1 Hour Lesson	\$200.00/4weeks 120.00/2weeks
One Time ride for 1 Hour	\$75.00 per lesson
Pay as Go Lesson	\$65 per lesson (\$60 for 2 or more people)
Ground	\$50 per lesson

Class length and fees are determined per program/individual
Riding Lessons run approximately 45-60 mins.
Lessons for Independent riders will include learning to tack up and groom.
Grooming and tacking for Assisted Riders is dependent upon abilities.

Program Payment Guidelines:

- Payment must be received on or before the first lesson of each session. If payment is not received on or before the first riding lesson, the rider will not participate in class and may forfeit the class spot.
- Current participants with a remaining balance are not eligible to register for the next session unless the balance is paid in full.
- NO REFUNDS WILL BE GIVEN AFTER THE SESSION BEGINS.
- IF YOU CANCEL, WE DO NOT OFFER MAKEUP LESSONS

Therapeutic Equestrian Center
Date:

Participant Application

General Information

Star use only:

Date received:

Given to finance:

Prepaid: Y N

				<u> </u>		
Participant Name:						
DOB:	Age:	Height: _		Weight: _		Gender
Address:						
City:			Stat	e:		Zip:
Home Phone:		Work Phone:	-		Cell Pho	one:
Email:						
How did you hear a						, etc)
While STAR cannot gu lesson time. If we cannot						scheduling availability for a until next session.
Is participant regist	tering through a	an agency: yes	no	Contact Person:		
Agency Address: _						
Agency Phone:				Ext		



Horseback Riding Experience Form

1. Has the rider sat on a horse alone while someone lead the horse at a walk?	
Yes No	
If yes, at what age?	
2. Has the rider ridden alone in an arena without a leader?	
Yes No	
If yes how often? Check all that apply Walk Trot Canter	
3. Has the rider ridden alone outside of an enclosed area without a leader?	
If yes how often? Check all that apply Walk Trot Canter	
	_
4. Has the rider ever ridden at STAR before?	
Yes No If yes, how long ago?	
	_
5. Has the rider ever taken lessons at another facility before?	
Yes No If yes, how long ago?	
6. Goals (i.e. why are you applying for participation? What would you like to accomplish?)	-



Participant Emergency Medical Treatment Form

In the event emergency medical aid and/or treatment is/are required due to illness or injury, I authorize Star Community® to:

- 1. Secure and retain medical treatment and transportation if needed; and,
- 2. Release relevant client records to the authorized individual or agency involved in the medical emergency treatment.

Participant Name: _____ Phone: _____

Emarganay Cantaati		
Emergency Contact:		Phone:
Alternate Emergency Conta	act:	Phone:
Physician's Name:		Phone:
Preferred Medical Facility:		
Health Insurance Co.:		Policy #:
Allergies/Medications		
Consent Plan		
	ed "lifesaving" by the	X-rays, surgery, hospitalization, medication and/or any physician. This provision will only be invoked if the person(s
Date:	Signature:	·
	Pare	ent or Guardian
Printed Name:		Phone:
Address:		
Non-Consent Plan		
I do not give my consent fo to indemnify and hold STAI damages, rights of action, of	R Therapeutic Equest or causes of action the rian Center activities.	I treatment/aid in the case of illness or injury. I expressly ago trian Center harmless against any and all claims, demands, at may arise from injuries sustained as a result participating In the event emergency treatment/aid is required, I request
I do not give my consent fo to indemnify and hold STAI damages, rights of action, of STAR Therapeutic Equestr the following procedures to	R Therapeutic Equest or causes of action the rian Center activities. It take place:	trian Center harmless against any and all claims, demands, nat may arise from injuries sustained as a result participating. In the event emergency treatment/aid is required, I request
I do not give my consent fo to indemnify and hold STAI damages, rights of action, o STAR Therapeutic Equestr	R Therapeutic Equest or causes of action the rian Center activities. take place: Signature:	trian Center harmless against any and all claims, demands, nat may arise from injuries sustained as a result participating. In the event emergency treatment/aid is required, I request

Participant Liability

I understand and acknowledge that equine activities involve risk of serious injury, including permanent disability and death. However, I feel that the benefits to me are greater than the risks assumed. I hereby certify that I know of no medical problems so as to would increase my risk of illness or injury as a result of participation in any activity associated with STAR Therapeutic Equestrian Center.

In consideration of my participation in the STAR Therapeutic Equestrian Center programs and/or use of the facilities provided by STAR Therapeutic Equestrian Center, Star Community®, I expressly agree and contract, on behalf of myself, my heirs, executors, administrators, successors and assigns, that damages arising from personal injuries (including death) sustained by me in result, in whole or in part, from the negligence of STAR. By the execution of the agreement, I accept and assume full responsibility for any and all injuries, damages (both economic and non-economic), and losses of any type, which may occur to me and I hereby fully and forever release and discharge STAR Therapeutic Equestrian Center, its insurers, employees, officers, directors, and associates, from any and all claims, demands, damages, rights of action, or causes of action, present or future, whether the same be known or unknown, anticipated or unanticipated, resulting from or arising out of the participation in and /or use of said programs and facilities.

Signature:	Date:	
Participant (if 18 and over) /Parent or Guardian		
Printed Name:		

Individual Photo Release Form



Name of Individual:	Permission Given (x)	Permission Denied (x)
Pictures of individual can be taken on Star-owned		
devices and provided to Star's nursing staff as		
deemed medically necessary.		
Pictures of individual can be taken on Star-owned		
devices and posted on Star Community's website		
Pictures of individual can be taken on Star-owned		
devices and posted on Star's Facebook Page		
and/or other social media pages		
Videos of the individual can be taken on Star-		
owned devices and posted on Star's social media		
pages.		
Pictures of the individual can be taken on Star-		
owned devices and used in Star's promotional		
print publications including, but not limited to		
Annual Reports, newsletters, appeal letters,		
brochures, display boards, training materials, etc.		
Pictures or videos can be taken on Star-owned		
devices or at a professional photo studio for personal		
usage of the individual such as being hung in the		
home, put in photo albums, or shared with family.		
This permission excludes other publication of the		
pictures and videos.		

Under this permission, I (the individual) retain the right to refuse being photographed or videoed on any occasion for any reason. Star will keep last names confidential unless permission is specifically granted on an as-requested basis.

Persor	n's or Legal (Guardian's signature:	
Date:		_	

This release will remain valid until written notification is provided to change the status of photo release.



Participant Program Guidelines

- Lessons are given all year long. The horses have break weeks during which there will be no classes.
- New Assisted Therapeutic riders must complete a riding assessment prior to being scheduled in a class.
- Before registering for riding lessons, please be advised: Register for riding at a time when you can attend all scheduled classes. Regarding lessons missed due to sickness/injury/COVID, each rider is still expected to pay for those missed lesson(s). (We do not offer make ups, unless there is a cancellation by the instructor)
- Make-up classes may or may not be scheduled at the usual day/time.
- Classes that fall on major holidays: Easter, Memorial Day, Labor Day, Thanksgiving, Christmas will not be made up, riders will not be charged for these classes.
- Instructors, at their discretion, may plan non-mounted horsemanship classes in the case of horse illness, excessive rain, wind or temperature that make it unsafe to be mounted.
- Riding lesson content includes: safety, grooming, ground handling, tacking, correct body position while riding, harmony with the horse, and confidence building.
- If a participant is going to miss/cancel a lesson, please notify STAR before scheduled lesson via call or email.
 Classes that a participant calls out from are not made up.
- If a participant has 2 no call no shows during a session, they will forfeit participation for remainder of said session and jeopardize participation in future sessions. A no call no show is a failure to contact/report to the EQ prior to the start of the assigned lesson time via phone call/voicemail or email.
- For safety reasons we do not allow observers in the arena or stable area during classes. There are observation areas for parents/caregivers and family to watch. However, please let us know if you would like to take photos of your favorite rider in a lesson so the instructor can get your rider only set up for picture taking.
- For safety reasons, a parent/caregiver (who brings the participant) must be present on the property for the duration of the lesson.
- Please do not arrive more than 5 minutes before the start of class. Participants who arrive more than 15 minutes after scheduled class time will not be permitted to join the class and will not a receive a makeup for that class.
- Every participant in every mounted class must wear properly fitting ASTM/SEI approved helmets. STAR provides approved helmets if participants don't have one. Participants must wear long pants that reach the ankle when riding and they must wear sturdy closed and heel, small heel shoes or boots. Failure to follow pants/shoes consideration may result in forfeiting the lesson.
- Each participant must have an updated Participant Application/Contract, Participant Guidelines, Liability Release, Media Release, Authorization for Medical Treatment and Health History form on file in the office at all times when actively part of programs at STAR. Assisted Therapeutic riders must have an updated Physicians Statement and Consent for Release of Information on file at all times while actively part of programs at STAR.
- "Horse Play" will not be tolerated in the stable, arena, or observation area.
- Participants are only allowed to turn out horses after class if accompanied by a volunteer or instructor.
- Parents need to limit the time they talk to the instructor during regular class time. Feel free to call and schedule a time to talk if you have a question or concern.
- Participants are responsible to put their equipment away after their lesson.
- Positively no alcoholic beverages or drugs allowed on the property.
- No smoking is allowed at or around the barn.
- Dogs are not permitted on the Equestrian Center grounds except for certified service dogs.
- Program payment guidelines are explained under the prices in this packet.

I agree to abide by the above written guidelines – program and payment guidelines.

I understand and agree that these Participant Registration and Information Packet are valid for one (1) year. It is my responsibility to provide STAR with any changes or updates during this period. STAR will provide these forms on an annual basis. Failure to comply will result in temporary suspension of participation, without make up or refund until paperwork is made current.

Signature:	Date:	