



## Recreational Participant's Application

Participant:			DOB:		Age:	
Height:		Weight:		Gender:      Male      Female      Prefer not to say		
Address:			City:		State:      Zip:	
Phone:		Cell:		E-mail:		
Employer/School:				Phone:		
Address:			City:		State:      Zip:	
Parent/Legal Guardian				Phone:		
Address:			City:		State:      Zip:	
Referral Source:				Phone:		
School:						
How did you hear about our program?						
Goals: (i.e. Why are you applying for participation? What would you like to accomplish?)						
Signature:					Date:	

For Official Use Only							
Day:		Time:		Instructor:		Tuition Assistance: <input type="checkbox"/> Y <input type="checkbox"/> N	
Deposit Received:			By:			Date:	

## Authorization for Emergency Medical Treatment

Name:		Participant      Staff      Volunteer	
DOB:	Phone:		
Address:	City:	State:	Zip:
Physician's Name:	Preferred Medical Facility:		
Health Insurance Company:	Policy #:		
Allergies to medications:			
Current Medications:			
In the event of emergency, contact:			
Name:	Relation:	Phone:	
Name:	Relation:	Phone:	
Name:	Relation:	Phone:	

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 Chariot Riders Inc.,

I authorize ***Chariot Riders Inc.*** to:

1. Secure and retain medical treatment and transportation if needed.
2. 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 "lifesaving" by the physician. This provision will only be invoked if the person(s) above is unable to be reached.

Date: \_\_\_\_\_ Consent Signature: \_\_\_\_\_  
Client, 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.

- Parent or legal guardian will always remain on site during equine assisted activities
- In the event emergency treatment/aid is required, I wish the following procedure to take place:

Date: \_\_\_\_\_ Consent Signature: \_\_\_\_\_  
Client, Parent or Legal Guardian

## Client Liability Release

I/my son/my daughter/my ward would like to participate in the **Chariot Riders Inc.** program(s). I acknowledge the risks and potential for risks of engaging in horseback riding activities as well as activities in close proximity to horses. However, I feel that the possible benefits to me/my son/my daughter/my ward are greater than the risks assumed. I hereby, intending to be legally bound, for myself, my heirs and assigns, executors and/or administrators, waive and release forever all claims for damages against **Chariot Riders Inc.**, its Board of Directors, Instructors, Therapists, Aides, Volunteers, and/or Employees for any and all injuries and/or losses that I/my son/my daughter/my ward may sustain while participating in activities at **Chariot Riders Inc.**

Print name:

Date:

Caregiver/Client/Legal guardian consent signature:

## Photo Release

I hereby: (choose one)

**consent** to and authorize

**do not consent** to or authorize

the use and reproduction by **Chariot Riders Inc.** of any and all photographs and any other audio-visual materials taken of me for promotional material, educational activities, and exhibitions or for any other use for the benefit of the program.

Print name:

Date:

Caregiver/Client/Legal guardian consent signature:

## Receipt of Rider Manual

Chariot Riders, Inc. operates under guidelines established by PATH. These guidelines allow us to provide quality riding experiences while ensuring safety for all participants. Please read this manual thoroughly and sign and return this page acknowledging your receipt.

Please contact us at (732) 657-2710 if you have any questions.  
Thank you for your cooperation.

I have read and understand Chariot Riders, Inc. Rider Manual.

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Rider's Signature

Date:

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Print Rider's Name:

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Parent, Guardian, or Caregiver:

Date:



## **Chariot Riders Inc. Rider Manual**

### **Program Descriptions**

CHARIOT RIDERS offer different types of programs as outlined below.

#### ***Therapeutic Activities***

The Therapeutic Riding program is designed to teach individuals with physical and/or mental challenges the skills necessary to ride a horse, as well as the skills necessary to appropriately groom and tack a horse in preparation for riding. Skills taught will vary depending on the rider. Therapeutic riding lessons are offered during all sessions and are taught by PATH certified therapeutic riding instructors. Although Chariot Riders strives to provide all clients with individual, 30-minute lessons, limited scheduling may require that Chariot Riders schedule group lessons on certain days and times. In the event a group lesson is necessary, the lesson time will be extended from 30- minutes to 1 hour. These lessons will be organized to group riders according to age, type of disability and level of riding skill. The maximum class size is four riders.

#### ***Horsemanship/Recreational Activities***

Chariot Riders also offers recreational riding including hunt seat, dressage, and jumping. In addition to our lesson program, we also offer summer camps, in- house and off- premises horse shows, clinics, year-round riding in our indoor arena and group trips and activities.

### **Program Policies and Procedures**

#### ***Age and Weight Requirements***

Individuals must be at least 4 years old before they can participate in any programs. There is no maximum age limit. Participants involved in mounted activities may not exceed 250 lbs. as we do not currently have horses that can safely carry more than that.

#### ***Safety Requirements***

Individuals may not be allowed to participate in the program if any of the following situations occur:

- Participant's condition is in any way exacerbated by riding
- An appropriate horse is no longer available for the participant
- The participant's behavior poses safety concerns (at the discretion of instructor)
- The available staff does not feel able to safely conduct a lesson or session with the participant
- Any other situation that may have a negative impact on the program in general (at the discretion of the instructor and/or program director)

#### ***Annual Update of Paperwork***

The following forms must be completed on an **annual basis** and submitted to the CHARIOT RIDERS office **by the stated deadline** in order for individuals to participate in our programs.

- Participant's Application and Health History
- Participant's Medical History and Physician's Statement
- Participant's Consent for Release of Information
- Authorization for Emergency Medical Treatment
- Release of Liability
- Receipt of Rider Manual

Submission of other paperwork such as IEPs and therapy evaluations is encouraged, as these assessments are a beneficial part of lesson planning. Riders with outdated forms will not be allowed to participate.

#### ***Scheduling Policy and Fees***

Registration and session dates are available by appointment. The current fee schedule is posted on our website. Registration forms for each session can be downloaded also from our website at [www.chariotriders.org](http://www.chariotriders.org). If you have any difficulty downloading the forms from the website, please contact the barn office at 732-657-2710. Registrations will not be considered if the paperwork has not been received. Riders who receive payment for lessons through a community agency must secure that payment as part of the registration process. Riding days and times will be confirmed by phone and/or e-mail.

#### ***Attire***

All riders must wear ASTM-SEI approved headgear while mounted. Helmets are available at the barn. Long pants are preferred; shorts are permitted, but not recommended, in warm weather. Nylon pants (such as warm-up pants or ski pants) are not permitted because they are too slippery against the saddle or pad. Hard soled shoes or boots with a heel are ideal for riding, but sneakers are acceptable. Sandals or open toed shoes are not permitted. Jewelry should be kept to a minimum.

Riders should dress appropriately for the weather conditions so they can be comfortable during lessons. Remember to layer clothing during cold weather and to wear warm coats, heavy socks, long underwear or tights, gloves, and ear protection that will fit under the riding helmet. In warm weather, please remember to wear light-colored clothing and apply sunscreen before riding. Riders may also want to bring their own water bottles.

### **Cancellation Policy and Make-ups**

Every attempt will be made to avoid cancellations. However, there are situations that are unavoidable at times, such as, equine health related issues, dangerous weather, and staffing. We appreciate your understanding and support regarding our cancellation policy.

1. **Cancellations by Riders: Payment for each month's lessons is due on the first day of the month.** Changes in a rider's schedule must be reported before the payment is due for any reschedule or non-payment of the lesson in question. There are no refunds on lessons missed or cancelled. If given 24 - 48 hour notice of cancellation the student will be allowed to make up on Friday's if the schedule allows for a \$15 fee.
2. **Cancellations by CHARIOT RIDERS:** You will be notified by phone at the number(s) provided on your registration form if lessons are cancelled. Non-mounted lessons may be provided during inclement weather, so please do not assume that lessons will be cancelled unless you have been notified by the CHARIOT RIDERS office. Every attempt will be made to reschedule lessons cancelled by CHARIOT RIDERS during the makeup week at the rider's regular time slot. If you cannot attend your make-up class, the lesson will be forfeited. Credits or refunds will be given to therapeutic riders for lessons cancelled by CHARIOT RIDERS that are not able to be made-up.

### **Late Arrivals**

Participants who arrive **up to 15 minutes** late may have their lesson but must understand that their lesson will still end at the regularly scheduled time. After the fifteen (15) minute waiting period has passed, the volunteers will be instructed to return the horse to the barn and the lesson will be forfeited.

### **Parking**

Dedicated rider parking is available near the arenas. Please note that the speed limit on the farm is 5 m.p.h.

### **Designated Waiting Area and Observation Area**

Upon arrival for lessons, riders and family members/caregivers should gather outside their assigned mounting area. Instructors will meet riders at this location to select helmets and prepare for the lesson. Family members/caregivers and guests should use the observation areas outside the arenas for observation of lessons.

Children must be under the supervision of a parent or adult caregiver at all times.

**The barn is a busy place during lesson times. For your safety and the safety of others, please do not congregate in the barn, in front of the barn, or in the pathway leading from the barn to the mounting area. This area needs to remain clear for the horses. Only staff and volunteers are permitted in the barn, paddocks, and arenas.**

### **General Barn and Farm Rules**

1. **Treats must not be offered to the horses by anyone at any time.** If you wish to donate carrots or apples, please bring them to the main office. No other types of treats will be accepted. It is important for the horse's health that these guidelines are followed. **Volunteers, however, are allowed all forms of treats such as cookies, chips, etc. Donations of treats for our hardworking volunteers are always welcome and appreciated and may also be delivered to the main office.**
2. For safety reasons, several areas around the farm are posted "Authorized Personnel Only". Please observe these signs during your visits. **Only staff and volunteers are permitted in the barn.**
3. There is no smoking allowed in the barn.
4. The speed limit on the farm is 5 m.p.h. Please drive carefully.
5. Parents, guardians, or caregivers must remain on the premises during lessons if:
  - The participant is under the age of 14, or;
  - The participant is in the care of or under the supervision of a parent, guardian or caregiver.
6. **Please supervise children at all times to ensure that they do not enter any restricted areas.** No running or fence climbing is allowed. Please encourage quiet play in the designated waiting and observation areas. This is for the safety of the children and to ensure that no horses are startled during lessons.
7. Photography is permitted as long as it is not interfering with the lesson in any way or startling the horses and sharing of images on Social Media of any Equines or Chariot Riders property must be approved by the Instructor or Director.

#### **Fee Schedule**

##### **Item Fee Payment Schedule**

Pricing for riding lessons at Chariot Riders is as follows:

**\$40 for Therapeutic riders**

**\$50 for Horsemanship/Recreation riders**

**\$45 for Family members taking weekly lessons**

**Please note** that lesson prices are based on either a 1/2-hour private lesson or a 1-hour group lesson. Group lessons consist of 3-4 students per session. CHARIOT RIDERS maintain a listing of community resources that may assist with full or partial payment for riding. A good starting place for accessing resources is to submit an application to the Developmental Disabilities Administration. To obtain more information, contact the regional office for your county listed on their web page at <http://www.njcd.org/>