



Where do you currently take riding lessons and how often? How long have you been riding?

What are you working on in your lessons? Do you show, if so what level?

What experience do you have working in the barn? (For example, mucking stalls, braiding, bandaging, horse care, sweeping, turnout etc)

Have you had the opportunity to teach any riding lessons? If so please provide details.

Why do you want to be a Kemur counselor? What do you think you could contribute to our camp?

What clubs or extracurricular activities do you participate in during the year?

Please attach any other additional information that will help me get to know you. Please also feel free to email me with any concerns or questions.

**Please let me know if you would like to be a camper AND a Working Student this summer.**

I will email all applicants to let them you know if you have been selected and for which weeks.

Friend you would like to be a Working Student with: \_\_\_\_\_

Please indicate any current medical concerns such as asthma, allergies. Detail the condition and indicate if it poses any restrictions to camp activities. List any medications to be administered at camp and be sure to bring original prescription container and letter of consent which provides details and dosage. The medication should be checked in at the office during registration. Please include any information about behavioral history in the child's family atmosphere that should be brought to our attention.

Participant Agreement and Acknowledgment

Unless I advise you otherwise in advance in writing, I approve of my child's participation in all of the camp's programs and activities, and acknowledge that such participation involves risks and hazards incidental thereto, all of which are expressly assumed by me. I hereby waive, release, absolve and agree to indemnify and save harmless Kemur Camp Ltd and its' Directors and employees. I agree that having such taken precautions as in your discretion are considered advisable; you shall not be held responsible for any accident or sickness to my child. Should my child require emergency medical attention, I hereby consent for her to receive examination and treatment. All reasonable attempts will be made to contact the parent or guardian prior to any treatment. I agree to be responsible for any expenses incurred including, but not limited to dental, pharmaceutical, and transportation costs. Kemur Camp Ltd. will not be responsible for any loss or theft of camper's property. I hereby consent that Kemur Camp Ltd. may use any photos or video taken of my child for promotional materials. I understand that Kemur camp is NOT a peanut free environment. Information on this application is kept private and confidential, it is not released to a third party.

Parent/Guardian signature \_\_\_\_\_ Date: \_\_\_\_\_

Please print above name \_\_\_\_\_

The Working Student fee is \$475 (including HST) per week, due May 1st.

I will notify girls if they are accepted and for which weeks as soon as possible, I hope to have all positions filled by March 1st. Thank you for applying!