

Seasonal Camping Agreement

Camping Season: Mar 1-mid Nov (last day before gun season), 2025

Site # _____

Name _____
Last First

Address _____
Street City State Zip

Phone (_____) _____ (_____) _____
Home Cell

Email _____

Pricing: Seasonal site w/hitch rail...\$1200
Seasonal site with two stall barn on-site...\$1700
Seasonal site with 4 stall barn on-site...\$2200
Private stall in barn...\$150

Deposit: \$400 – Due by Nov 1, 2024

Remainder of balance due in two equal payments, Mar 1 & July 1 of 2025

Winter Storage Fee: \$100 – Due by Nov 1, 2024

Deposits and fees are non-refundable. Sites with payments not received by the due dates will be forfeited.

By signing below, I(we) am stating that I have read, fully understand and I agree to abide by the Seasonal "Camping Information", "Terms of Use" and "Camping Rules".

Signature of Lessee Date

Signature of Lessee Date

Please make checks payable to "Hoosier Horse Camp"
6732 NCR 1250W Norman, IN 47264
Checks or Cash, No credit cards.

WAIVER AND RELEASE OF LIABILITY FORM

The Hoosier Horse Camp property is privately owned. The camper accepts camping privileges with the understanding as follows: I hereby assume all of the risks of participating in any/all activities associated with camping at Hoosier Horse Camp, including by way of example and not limitation, any risks that may arise from negligence on the part of the persons or entities being released, from use of the camping facilities, dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

I certify that I am physically fit, have sufficiently prepared or trained for participation in this activity, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in horseback riding or camping related activities. The undersigned agrees that he/she is responsible for his/her own personal property, including, but not limited to camper, contents thereof, horses, tack, pets, and the like, and the responsibility is not that of Hoosier Horse Camp

I acknowledge that horseback riding and camping activities may involve a test of a person's physical limits and carries with it the potential for injury and property loss. The risks include, but are not limited to, those caused by animals, terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, and actions of other people including, but not limited to, participants, volunteers, monitors, and/or producers of the activity.

I acknowledge that this Waiver and Release of Liability Form will apply to any activity in which I may participate, and that it will govern my actions and responsibilities at said activity. In consideration of my application and permitting me to use the camping facilities at Hoosier Horse Camp, I hereby take action for myself, my heirs, executors, administrators, next of kin, successors, and assigns as follows: (A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from Hoosier Horse Camp, the proprietors, and/or their directors, officers, employees, volunteers, representatives, and agents; (B) INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in these activities, whether caused by the negligence of release or otherwise. I acknowledge that Hoosier Horse Camp, the proprietors, and/or their directors, officers, employees, volunteers, representatives, and agents are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf. The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

This document is in effect for calendar year January 1 through December 31, 2025.

All family/household members must sign waiver. Responsible adult to sign for minors (under 18).

Signature

Printed Name
