**2020 HOLIDAY Lesson Session**

7 WEEK SESSION ***\*November 2-December 19 \*\****

*All students fill out paperwork including new Release and Hold Harmless waiver. Thank you!*

*Please note that there is a $10 LATE ENROLLMENT FEE for those not getting their enrollment in by 10/31 deadline.*

**Group & Semi-private:** **7** week session/1x weekly **$245.00**

**Private ½ Hour: 7** week session/1x weekly -- **$315.00**

***ATTENTION LESSON PARENTS*** *\*****Limit to 1 MAKE UP LESSON per session unless with Drs. Excuse.*** *ALL CANCELLATIONS MUST BE MADE* ***4 HOURS PRIOR TO LESSON*** *BY CALLING* ***STUDENT'S INSTRUCTOR DIRECTLY TO RECEIVE MAKE UP LESSON CREDIT****. MAKE UP LESSONS MUST BE TAKEN IN TIMES OFFERED BY INSTRUCTOR. IF UNABLE TO MAKE THE TIMES OFFERED, MISSED LESSON WILL NOT BE ABLE TO BE MADE UP.* ***If a scheduled Make-up lesson is missed or canceled for any reason, it will be marked as Made-Up. No call for Cancellation/No Make-Up.***

**PAY AS YOU RIDE LESSON FEES:**

**PRIVATE LESSONS $50.00\* ½ hour.**

**GROUP/SEMI-PRIVATE LESSONS $45.00\* 45 – 60 minutes**

***All “Pay-As-You Ride” lessons MUST be scheduled weekly by calling instructors to find lesson time—phone numbers below.***  No Beginners can take Group Pay as You Go Lessons.

**ENROLLMENT FORMS AND WAIVERS ARE AVAILABLE ONLINE AT www.posthill.net**

**ENROLLMENT PERIOD starts 2 weeks PRIOR to start of each session**. Instructors need time to make needed changes and place new enrollees in schedule! **Please get tuition in on time. Thank you!**

*IF NOT RE-ENROLLING FOR THE NEXT SESSION, PLEASE LET PEGGY KNOW ASAP. THANK YOU.*

*$10 Referral credit for each person who signs up by your referral—must FILL IN ON ENROLLMENT FORM and you will receive credit on tuition. It is the responsibility of eligible students to claim credit.*

**PAYPAL** AVAILABLE ONLINE AT [WWW.POSTHILL.NET](http://www.posthill.net/)  ***THE 1ST WEEK ONLY*** and also PLEASE SUBMIT THE FORM AT FARM AT LESSON IF YOU CHOOSE THIS OPTION.

*LESSON ENROLLMENT FORM****:***

*ENROLLMENT PERIOD IS 10/19-10/31*

DURING THE CORONA VIRUS WE ASK ALL STUDENTS AND PARENTS TO WEAR PROTECTIVE FACE COVERING TO LESSONS AND WEAR WHILE ON THE GROUND AND MOUNTING, AND THEN MAY TAKE OFF DURING RIDING PORTION IF KEEPING 6 FEET AWAY FROM OTHER RIDERS AND INSTRUCTOR. THANK YOU!

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Group/Semi Private $245.00\*\_\_\_\_\_\_ Late Enrollment $255.00\_\_\_\_\_\_\_\_\_\_

Private $315.00\*\_\_\_\_\_\_ Late Enrollment $325\_\_\_\_\_\_\_\_\_

NEW: \_\_\_\_\_REFERRED BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PayAsYouGo Option\_\_\_\_\_\_\_*\*\*Make sure you are paying the correct*

*PayAsYouGo amount as listed on page 1.\*\**

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Changes?\_\_\_\_\_

Western or Hunt Seat:\_\_\_\_\_\_ Age:\_\_Amount enclosed:\_\_\_\_\_\_\_\_

IF SENDING IN BY MAIL, PLEASE MAIL TO: *PEGGY COGNATI/POST HILL FARM,*

*11659 RAVENNA ROAD, TWINSBURG, OH 44087*

Instructor may be reached at the following number: Peggy - 216-390-7400. Beth/Office 330-998-2944. Farm driveway address is 9736 Liberty. NO MAIL SENT TO THIS ADDRESS, PLEASE!

**RELEASE AND HOLD HARMLESS WAIVER**

**PLEASE READ THOROUGHLY and MUST FILL IN ALL BLANKS**

WITNESS THIS AGREEMENT dated this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_, 20\_\_\_, by and between Post Hill Farm, Inc., its owners, heirs, agents, assigns, employees, and independent contractors (including, but not limited to Peggy Cognati) hereinafter referred to as Management, and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereinafter referred to as USER/STUDENT, and, if USER is a minor, USER’S PARENTS or guardians,\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereinafter collectively referred to as USER.

For consideration received, and in return for the use, today and on all future dates of the property, facilities and services of Management. Management’s instructors, employees, drivers and agents, Steve and Beth (Fedor) Markusic; and Post Hill Farm, Inc.; User, User’s heirs, assigns, and representatives, hereby agree as follows:

1. Inherent Risks and Assumption of Risk. The undersigned acknowledges there are inherent risks associated with equine activities such as described below, and hereby expressly assumes all risks associated with participating in such activities. biting, kicking, shying, stumbling, rearing, falling or stepping on, that may result in an injury, harm or death to persons on or around them; the unpredictability of equine’s reaction to such things as sounds, sudden movement and unfamiliar objects The inherent risks include, but are not limited to the propensity of equines to behave in ways such as, running, bucking, persons or other animals; certain hazards such as surface and subsurface conditions; collisions with other animals; the limited availability of emergency medical care; and the potential of a participant to act in a negligent manner that may contribute to injury to the participant or others, such as failing to maintain control over the animal or not acting within such participant’s ability. User acknowledges that horses, by their very nature are unpredictable and subject to animal whim. User assumes all risks in connection therewith, and expressly waives any claims for any injury or loss arising therefrom.
2. User agrees to abide by and follow Manager’s rules and regulations, which shall be posted and or available from time to time. User further acknowledges that the behavior of any animal is continent to some extent upon the ability of User. User assumes all risks therefore and warrants a full and fair disclosure of Rider’s abilities has been made to Management. User agrees to assume any and all risks involved in or arising out of User’s use of any equipment or livestock pertaining to the rental of horses or taking of riding lessons, the use of any arena on the premises of POST HILL FARM, INC. and for purposes of taking riding lessons either on the premises or lessons given off the premises by Management personnel.
3. USER (OR USER’S PARENT OR GUARDIAN IF USER IS A MINOR) AGREES TO HOLD HARMLESS, INDEMNIFY AND DEFEND MANAGEMENT AGAINST ANY AND ALL CLAIMS, DEMANDS, CAUSES OF ACTION, DAMAMGES, JUDGEMENTS, ORDERS, COSTS OR EXPENSES, INCLUDING ATTORNEY’S FEE, WHICH MANY IN ANY WAY ARISE FROM OR BE IN ANY WAY CONNECTED WITH USER’S USE OF OR PRESENCE UPON THE PROPERTY OF POST HILL FARM, INC., MANAGEMENT AND THE FACILITIES LOCATED THEREON. In the event User is a minor, the parent or guardian shall further indemnify, defend and hold Management harmless from any such claims by said minor child.
4. In the event User is using User’s own horse, or a horse(s) not owned by management, User warrants said horse(s) shall be free from infection, contagious or transmittable diseases. Management reserves the right to refuse access or use of any horse upon the premises that does not appear to Management to be in good health, or is deemed dangerous or undesirable.
5. Any action brought under this agreement shall be brought within one (1) year of the incident or accident giving rise to said claim. User agrees that damages shall be limited to $250 for property damage, actual expenses incurred, and a maximum of $10,000 for damages such as pain and suffering. 6. User agrees to waive the protection of any applicable statutes in this jurisdiction whose purpose, substance and/or effect is to provide that a general release shall not extend to claims, material or otherwise, which the person giving the release does not know or suspect to exist at the time of executing said release.
6. ADULT STUDENT & SPOUSE or BOTH PARENTS OR GAURDIANS OF MINOR STUDENT MUST SIGN BELOW:

SIGNATURE of ADULT STUDENT or MOTHER of Minor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Printed Name:\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE of SPOUSE of Adult Student OR FATHER of Minor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Printed Name:\_\_\_\_\_\_\_\_\_\_\_

MINOR STUDENT USER’S PRINTED NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AGE OF MINOR STUDENT: \_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Emergency Phone # Home Phone # EMAIL ADDRESS (please print clearly)