



18 U.S.C. 707

Alabama 4-H
Alabama Cooperative Extension System



4-H Horse Camp at Alexandria Farms

When: Saturday, **October 21st** 2017 9:00am-3:00pm

Where: Alexandria Farms (850 Grady Williams Road Hamilton 35570)

Ages: 9-18

Cost: \$40

What To Wear: Long Pants, Boots/Tennis Shoes (NO open toed shoes)

Payment Due: Tuesday, **October 17th** by 4:00pm to the Marion County Extension Office 372 7th Avenue SW Hamilton, AL 35570

Forms Completed by a parent/guardian: October 17th 4:00pm

***Make checks payable to: Allie Trentham ***

For more information call or email the Marion County Extension Office 205)921-3551 or rgd0007@aces.edu Open Mon.-Fri. 7:30AM-4:00PM 372 7th Ave. SW Hamilton, AL 35570

Alexandria Farms

HUNTER JUMPERS | RIDING LESSONS

Allie Trentham (205)495-2830



[Marion County 4-H](#)



[MarionCoAL4H](#)



[marioncountyal4h](#)

The Alabama Cooperative Extension System (Alabama A&M University and Auburn University),
is an equal opportunity educator and employer. Everyone is welcome!



4-H Horse Camp at Alexandria Farms

Google Map Directions: Drive 10.4 miles, 16 minutes
From: Marion County Extension Office (372 7th Ave. SW Hamilton, AL 35570) **To:** Alexandria Farms (850 Grady Williams Road Hamilton, AL 35570)

372 7th Avenue Southwest
 Hamilton, AL 35570

- ↑ 1. Head west on 7th Ave SW toward Smokeybear Rd

 315 ft
- ↘ 2. Turn right onto Smokeybear Rd

 499 ft
- ↙ 3. Sharp left onto AL-17 S

 0.3 mi
- ↘ 4. Turn right onto 7th St SW

 0.6 mi
- ↙ 5. Turn left onto AL-74 W/Bexar Ave W

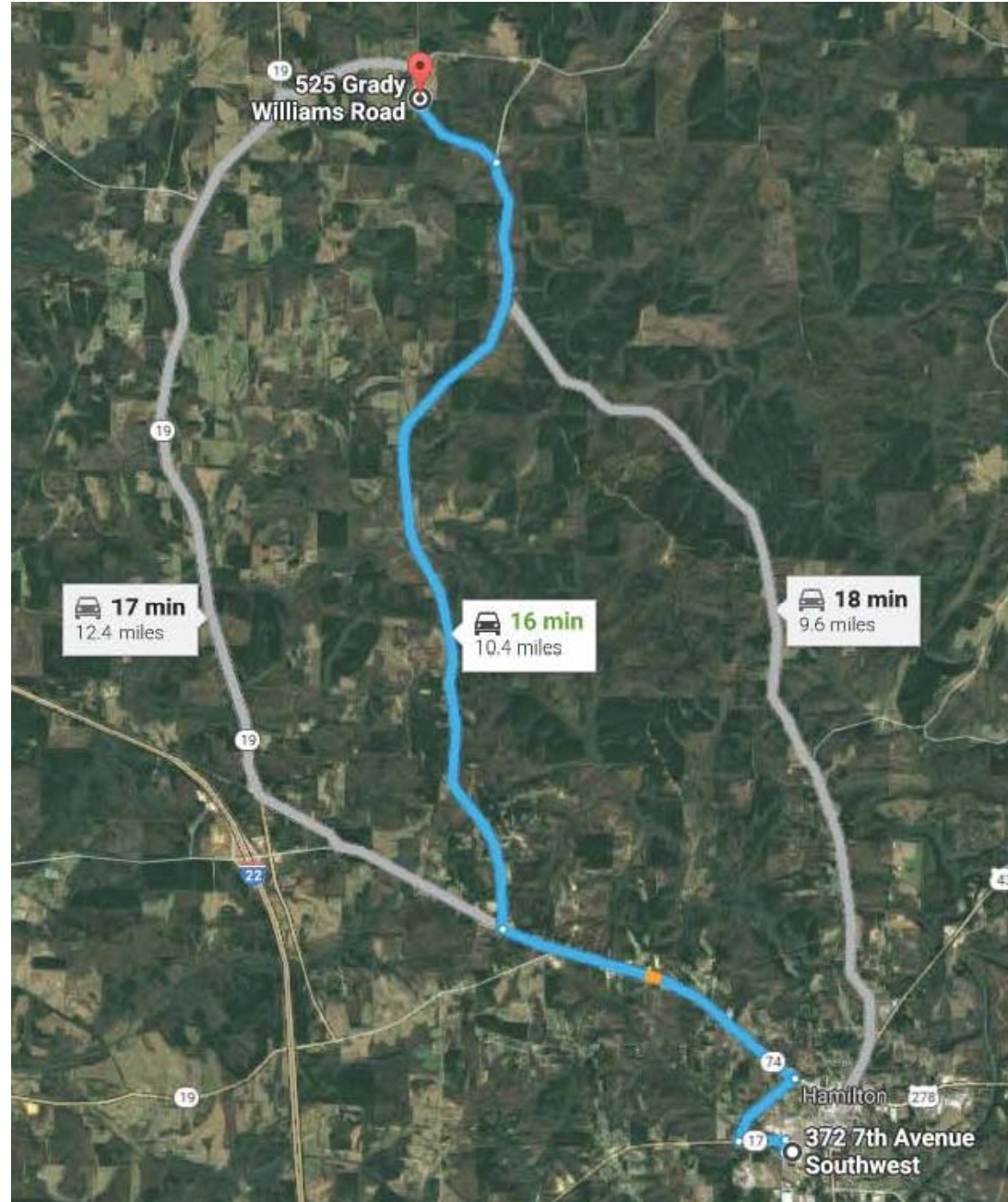
 2.4 mi
- ↘ 6. Turn right onto Co Rd 25

 6.0 mi
- ↙ 7. Turn left onto Grady Williams Rd

 0.8 mi

850 Grady Williams Road
 Hamilton, AL 35570

These directions are for planning purposes only. You may find that construction projects, traffic, weather, or other events may cause conditions to differ from the map results, and you should plan your route accordingly. You must obey all signs or notices regarding your route.



*****PLEASE be at the Event location by 8:55-9:00AM to drop off your child. PLEASE be at the event location by 2:50-3:00 to pick up your child.*****

Alabama 4-H Youth Code of Conduct

- I will exhibit good character and behavior, such as trustworthiness, responsibility, respect, caring, citizenship and fairness.
- I will value the rights of all others. As a 4-H member, I am committed to the policies of the Alabama Cooperative Extension System, Auburn University and Alabama A&M University.
- I will act and speak respectfully. I will not use language that belittles others or is disrespectful of individual differences.
- I will dress appropriately. Apparel including accessories must not have pictures or wording involving nudity, sex, weapons, violence, drugs, alcohol or tobacco.
- Apparel, accessories and equipment featuring culturally or racially insensitive images violates 4-H's values of respect, fairness and caring and will not be permitted.
- I will attend all sessions of planned programs.
- I will be responsive to the reasonable requests of leaders and comply with the need for personal safety.
- I will not use alcohol, drugs, or tobacco nor remain in the presence of anyone using them.
- I will not behave recklessly, engage in sexual misconduct, assault, threaten, or harm another person or abuse public or private property.
- When I have access to computers at Extension facilities, I will use the computer for educational purposes and will not access inappropriate Web sites.
- I recognize that these guidelines are not all inclusive and that the Alabama Cooperative Extension System may make adjustments to these policies.

MEMBER: *I have read the Alabama 4-H Youth Code of Conduct and agree to live up to the expectations. I realize my failure to do so could result in a loss of privileges during the event and/or in the future and may result in my being sent home at the expense of my parent(s) or guardian(s).*

4-H Member Signature _____
Date _____

SURVEY & EVALUATION RELEASE

- I hereby give permission **for my child** (under 19 years of age) and give consent **for myself**, as a parent or guardian, to complete surveys and evaluations that will be used to determine program effectiveness or to promote the program. I understand that participation in surveys and evaluations is voluntary and that I and my child may choose not to participate and may withdraw from surveys or evaluations without impact on my or my child's eligibility to participate in the 4-H program. I understand that I or my child may be asked for consent before completing a survey or an evaluation.
- No, I am not willing to participate – or give permission for my child to participate – in any program evaluation.

VERIFICATION

I, _____
(parent/guardian)
understand that participants will be supervised and that if a serious illness or injury develops, medical and/or hospital care will be given. I hereby give permission to the attending physician or other health care professional to hospitalize, secure proper treatment for, and order injections, anesthesia, or surgery for me or my child and affirm that the information set forth in the Health History is true and correct to the best of my knowledge and belief. I understand that as a parent/legal guardian, I will be responsible for the cost of service or treatment.

4-H Member Signature _____
Date _____

Parent/Guardian Signature _____
Date _____

I have read and understand the Alabama 4-H Youth Code of Conduct, Publicity Release and Survey & Evaluation Release.

4-H Member Signature _____
Date _____

Parent/Guardian Signature _____
Date _____

I hereby agree that I understand the risks or have been given the opportunity to ask for information concerning risks involved in this activity and assume all risks and release Alabama 4-H, the Alabama Cooperative Extension System, local Extension offices, Auburn University, Alabama A & M University, the State of Alabama, the Alabama 4-H Foundation and 4-H Youth Development Center, and their trustees, agents, officers and employees, from all claims, demands, and causes of action of any kind, including claims of negligence, which may arise from participation of me or my minor child in any Alabama 4-H sponsored activity, and this release is specifically granted in consideration of the services, programs and activities.

4-H Member Signature _____
Date _____

Parent/Guardian Signature _____
Date _____

Issued in furtherance of Cooperative Extension work, acts of May 8 and June 30, 1914, and other related acts, in cooperation with the U. S. Department of Agriculture. The Alabama Cooperative Extension System (Alabama A & M University and Auburn University) offers educational programs, materials, and equal opportunity employment to all people without regard to race, color, national origin, religion, sex, age, veteran status, or disability.



Equine Activity Release and Hold Harmless Agreement

for

Alexandria Farms & Riding Academy

850 Grady Williams Rd, Hamilton, AL

1. I, _____, the undersigned have read and understand, and freely and voluntarily enter into this Release and Hold Harmless Agreement with Eddie Lyle, Renate' Lyle and Alexandria Farms, understanding that this Release and Hold Harmless Agreement is a waiver of any and all liability (ies).

2. I understand the potential dangers that I could incur in mounting, riding, walking, boarding, feeding a horse while on Farm property; including, but not limited to, any interactions with other horses. Understanding those risks I hereby release the Farm, its owners, employees and anyone else directly or indirectly connected with the Farm from any liability whatsoever in the event of injury or damage of any nature (or perhaps even death) to me or anyone else caused by or incidental to my electing to interact with, mount, and/or ride any horse.

3. I understand and recognize and warrant that this Release and Hold Harmless Agreement, is being voluntarily and intentionally signed and agreed to, and that in signing this Release and Hold Harmless Agreement I know and understand that this Release and Hold Harmless Agreement will limit the liability of the Farm and it's owners and employees to include any activity, whatsoever, involving a horse, including death, personal injury and/or damage to property.

4. I further voluntarily agree and warrant to Release and Hold Harmless the Farm and it's owners and employees from any liability whatsoever, including, but not limited to, any incident caused by or related to said Farm owner's negligence, relating to injuries known, unknown, or otherwise not herein disclosed; including, but not limited to, injuries, death or property damage from: interacting with, mounting; riding; dismounting; walking; grooming; feeding; use of barn, stable, paddock, trails, farm and/or horse ring, in any capacity; falling off horse whether horse is bucking, flipping, spooked; or by failure relating to my riding or otherwise use and control, or lack thereof, of my horse or any horse while on Farm property.

Person voluntarily entering into this Release and Hold Harmless Agreement:

Date

Witness

Signature (parent, if minor)

Printed Name