# 

**MOOIKRANS REGISTRATION AND INDEMNITY FORM**

**CAMP DATE:**2019/..…..……/…..…..…

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| VISITOR’S INFORMATION | | | | | | | | | | |
| Name |  | | | Surname | | |  | | | |
| School |  | | | Age | | |  | | |
| Birthday |  | | | Can visitor swim? | | |  | | | |
| Riding skill: Beginner / Average / Experienced | | | | | | | | | | |
| **Medication/Ailments/Incidents that Mooikrans should know about?**  *\*Confidential information must please be written on the reverse side.* | | | | | | | | | | |
|  | | | | | | | | | | |
| FINANCES | | Mark X | Cost | | Amount | | Office Use | | | |
| Camp fees for this camp | |  |  | | **R** | |  | | | |
| Bus Service | |  | (R500) \* | | **R** | |
| Photo Card (± 300 photos) | |  | (R150) | | **R** | |
| Chuckwagon (Tuck-shop) | |  |  | | **R** | |
| COURSES – Choice of only 1 course per camp***. (Optional)*** | | | | | | | | | | |
| 1. Horsemanship Courses | |  | R 220 | | **R** | |  | | | |
| 2. Survival in the veldt | |  | R 220 | | **R** | |
| 3. First Aid | |  | R 220 | | **R** | |
| 4. Leadership Development  Course | |  | R 220 | | **R** | |
|  | | SUBTOTAL | | | **R** | | EFT | |  | |
|  | | MINUS DEPOSIT | | | **R** | | CASH | |  | |
|  | | TOTAL | | | **R** | |  | |  | |
| **BANKING DETAILS: MOOIKRANS, Standard Bank, Amersfoort, Branch no. 052543, Acc. no. 371 456 401** | | | | | | | | | | |
| Parent / Person Responsible | | | | | | | | | | |
| Name + Surname |  | | | | | Cell phone | |  | | |
| Email Address |  | | | | | | | | | |
| Postal Address |  | | | | | | | | | |

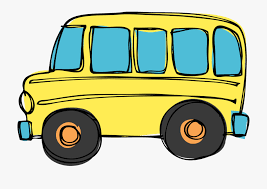
**Where did you hear about Mooikrans Equus?**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**LETTER OF INDEMNITY**  I hereby declare that I am aware of MOOIKRANS' rules.\*

I am aware that activities offered at MOOIKRANS, including but not limited to activities involving horses, handling of firearms and transport, may pose a risk. Accordingly, I declare that my child(ren)’s visit to MOOIKRANS is entirely my own responsibility and that I will not hold MOOIKRANS, the staff of MOOIKRANS, or any other affiliate of MOOIKRANS liable in the event of injury, death, damage, loss or any other event, whether guiltless or caused by negligence , during my child(ren)'s visit to MOOIKRANS EQUUS. This disclaimer is equally applicable to adults who visit MOOIKRANS.

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| ……………………………………………………..  **Parent/ Person Responsible** | **…………………………………………………………**  **O.b.o. Mooikrans Equus** | **………………………………………………………….**  **Date** |

Number

** The bus leaves at 8:00 from the parking lot in front of SOLARMAN, Hans Strydom Drive, Silver Lakes, Pretoria East on the day the camp starts. Confirm your place on the bus by sending a WhatsApp to 083 732 8172 two days before camp starts.**

Yes/No