Tigers Choice
Equestrian Camp

Clemson University Equine Center

June 14-17, 2018
**Purpose:** To provide riders with an intensive riding camp that focuses on giving the riders the chance to experience what being a rider on Clemson University’s IHSA (Intercollegiate Horse Show Association) Equestrian team would be like. Campers ride Clemson University Equestrian Team horses in IHSA format daily, while also experiencing the culture of Clemson University through a student perspective.

**Dates:** June 14 – 17, 2018

**Location:** Clemson University Equine Center
Clemson University Campus

**Cost:** Camp tuition is $750. Camp fees include meals, lodging, insurance, a variety of horses/ponies to ride, the use of all tack/equipment, recreation, riding and classroom instruction, and a college experience.

**Camper Eligibility:** Eligible riders MUST be at least one of the following:

- A high school junior or senior that has previously attended our week long Tiger Talent Equestrian Camp
- A rising Clemson University Freshman interested in riding for the Clemson University Equestrian Team

**Registration:** Campers must submit completed application no later than May 1, 2018 and Registration can be made online following the link at [https://www.clemson.edu/cafls/departments/equine-center/outreachresearch/index.html](https://www.clemson.edu/cafls/departments/equine-center/outreachresearch/index.html) under the Tigers Choice Equestrian Camp heading.

Once accepted, additional forms will be required to attend the camp. Camper’s Agreement Form, Parent’s Agreement and Consent Form, and the Camper’s Health Form and Physical must be present prior to the start of camp on June 14, 2018. Campers will be notified of acceptance via email.

**Health Requirement:** A Participant Health Form is included in the camp informational packet. It is very important for youth and parents to alert the camp staff in regard to any physical limitations or allergic reactions a youth may have to specific medicine(s), insect stings, food, etc. Any special conditions/limitations should be given in writing to the camp director. Your cooperation in this matter is appreciated and is designed to keep your youth safe. Each participant must present documentation of a physical exam performed by a licensed medical provider indicating that the youth is physically fit enough for participation in an intensive horseback riding camp.
**Horses:** Youth will ride the Clemson University Equestrian Team’s horses. Horses are allocated for specific IHSA levels and disciplines. Riders will be assigned an appropriate mount prior to each riding session with specific consideration given that each rider has the opportunity to ride a variety of horses. This variety will more fully prepare riders for participation in a collegiate riding program or team.

**Equipment:** Campers will review tack requirements listed by the coach/management and use the tack/equipment assigned to each horse. Questions regarding saddle/rider fit shall be directed to coaching, management, or other camp staff.

Although it is not required, campers may bring owned saddles. Coaching staff and management will have the final say in whether the saddle is appropriate or not to use for our horses. Personal saddles will be safely locked each night in a tack room at the equine center.

**Insurance:** Campers are not provided medical insurance during their participation period. Any injury to rider is at the participant’s risk and expense. All campers must have primary insurance for illness and accidents.

**Arrival Procedures:** Camper check-in begins on Thursday, June 14th at 4:00 PM and ends at 5:00 PM. It will not be possible for the staff to check campers in before 4:00 PM. Upon arrival, campers should proceed to the check-in area of the lobby of the designated residence hall on Clemson University’s main campus. It is requested that all unloading be done as efficiently as possible to help relieve congestion. Parking is limited directly adjacent to residence halls. During check-in, any outstanding paperwork will be remitted. Following check-in at 5:00 PM – parents and campers will receive an orientation and review camp policies with the camp director and staff. Parents must be present for this meeting and are excused following the orientation meeting. Campers will then proceed to dinner at the dining hall and will have an evening session at the equine center on Thursday night. **All medical forms must be on file with camp staff prior to parent/guardian departure. There will be no exceptions made for not having all the proper paperwork filed. Any camper that doesn’t have all of the proper paperwork will be sent home with no refund.**

**Overnight Housing and Transportation:** Campers will be transported using vans or cars when shuttling between the dining hall/dorms and Clemson University Equine Center. Overnight accommodations will be at the dormitories on main campus. Campers will be assigned a roommate based on age appropriateness and availability. Special roommate requests will be accommodated only if the camp director has been notified via of requests by 5/1/2018 from both parties.
**Departure Procedures:** Parents are requested to arrive for pick-up of youth on Sunday, June 17 at 1:00 PM at the Equine Center where parents and riders can enjoy a closing ceremony prior to departure. **No camper will be allowed to leave until they are officially signed out with the camp director.** Luggage will be transported from the dormitories to the Equine Center by campers and camp staff prior to departure of campus that morning.

**Activities:** the bulk of camp activities include riding instruction. Other horsemanship activities may include the following hands-on demonstrations and workshops:

- IHSA Riding Format
- Video review of riding sessions
- Tack/equipment care
- Equine career opportunities
- Stable Management Demonstrations

Activities related to the student culture of Clemson University will include a student’s perspective of freshman living situation while staying in a dorm on campus, campus tour, eating and shopping in downtown Clemson, and much more! This experience gives perspective students and soon-to-be students the chance to get a small taste of what it is like to be a Clemson Tiger.

**Behavior Policy:** Safety will be emphasized at all times. To insure a safe atmosphere, campers must strictly adhere to camp personnel and their policies. Failure to adhere to these rules will result in the camper being sent home at the parents’ expense. The following misconduct WILL result in a camper being sent home:

- Deliberate cruelty to animals
- Deliberate destruction of facilities or equipment
- Possession of alcoholic beverages or illegal drugs
- Blatant discourtesy to camp personnel
- Disregard of camp personnel
- Disregard of camp personnel requests to obey rules and regulations
- Disrespectful or dangerous behavior towards other campers
- Unacceptable or dangerous conduct
- Possession or use of fireworks
- Use of inappropriate language

The following items are not allowed at camp:

- Tobacco
- Alcohol
- TVs and/or electronic games
- Illegal drugs
- Knives, guns or other weapons
- Fireworks
Family/Guest Visitation: No parent, guardian, family member or guest should visit the campers during camp unless pre-approved by the camp director. We understand this may be difficult, but for the camper to truly get the camp experience, parents and/or family members cannot be allowed to visit during camp. Please be sure all the supplies that the camper needs during camp are delivered and stored before you leave on June 14, 2018. We ask that you do not bring supplies during the week if at all possible. If you are concerned about your child or just want to check in with camp staff, please feel free to call the camp director, Carra Eisenbies, at cuec@clemson.edu or 864-646-3554.

Clemson University Policy on Headgear Safety Equipment: The Clemson University Equine Center policy requires that all riders wear protective headgear that meets or surpasses current applicable ASTM (American Society for Testing and Materials/SEI (Safety Equipment Institute) standards while riding. The headgear must be properly fitted, properly worn, on the top of the head, and worn with the strap or harness securely fastened. The term “riding” as used in this policy refers to the mounting, riding, or driving of a horse or pony while participating in this camp activity. The term “rider” refers to a person engaged in riding.

It is the responsibility of the rider, and the parent or guardian of the rider, to confirm that the headgear worn by the rider complies with the safety standards set forth above; is properly fitted, fastened and work; and is in sufficiently good condition that it would protect the rider in the event of an accident. The CU Equine Center, Equestrian Team, Clemson University and the camp personnel and volunteers associated with the camp program are not responsible for providing headgear and are not responsible for checking headgear worn by riders in order to comply with this rule.

Any Rider found to be riding in violation of this policy by camp staff or volunteers will be immediately prohibited from further riding, and shall be barred or disqualified from the event or activity in which the rider is engaged at the time of the violation.

The Clemson University Equine Center make no representation or warranty, expressed or implied, concerning the headgear worn by any rider during a sponsored event or activity. In particular, the Clemson University Equine Center makes no representation or warranty concerning the safety performance of any headgear worn by any rider. The CU Equine Center cautions riders and their parents and legal guardians that death or serious injury may occur despite wearing safety headgear as all equestrian sports involve inherent dangerous risk. No headgear can protect against all possible injuries.

All Campers are required to wear a helmet as described above regardless of riding level or discipline.
Camper Needs for Equestrian Camp

**Personal Items:**
- Soap
- Shampoo
- Clothing (as designated below)
- Sun Screen
- Insect Repellent
- Personal Toiletry Items
- Bedding (Twin XL sheets or a sleeping bag, and pillow)
- Shower shoes
- Money for snacks, other activities on campus
- Towels
- Laundry bag
- Water Bottle

**Riding & Stable Area Apparel:** Show clothes will not be required, but all campers will be expected to ride in neat and professional looking apparel. Fitted shirts, polo shirts, or other fitted riding tops are preferred tucked in to breeches or jodhpurs along with tall boots or chaps and paddock boots. Overly worn clothing with holes is not appropriate attire. Shorts, wide leg pants, halter tops, strappy tank tops and other unsuitable clothes will NOT be acceptable. Tank tops should have a minimum of a 1” strap, and may only be worn during recreational times. Rider must also provide an owned helmet in compliance with the previously discussed Clemson University Policy on headgear.

General Apparel – Shorts, jeans, t-shirts, polos, blouses, tennis shoes, etc. are acceptable away from the barn area. Revealing clothes are STILL NOT ACCEPTABLE even during recreational activities at the dormitories or on campus.

- Light jacket
- Ample underclothes
- Clothes and swimsuits (tentative) to participate in recreational activities/games
- Rain gear
- Sweat shirt
- Ball cap/sun hat
- Ample socks

Please do not bring expensive jewelry, cameras, radios, coolers, food or excessive amounts of money to camp. We are not responsible for any lost or stolen items.

**Food and Snacks:** Modest amounts of snacks are permissible but should be disposed of properly in acceptable trash receptacles. Food and drinks may be maintained in designated areas at the barn. Snacks/drinks can be purchased on main campus. Snacks/drinks may be packed to take to the equine center daily. Campers will be provided with a modest breakfast daily at CUEC; dinner daily at the campus dining hall; up to two lunch meals will be eaten in town and campers should bring money to
purchase. Campers with food allergies should let camp personnel know by May 1, 2018, so this can be addressed.

**Tentative Schedule of Activities**

**Thursday, June 14, 2018**

4:00 – 5:00 PM  Check in/Move in – *On Campus Dormitory*

Upon Arrival: Receive room assignments; Place luggage in rooms

5:00 PM  Orientation for campers/parents

5:30 PM  Parents dismissed, Campers have dinner at dining hall

6:00 PM  Dinner and evening activities including orientation of CUEC

10:30 PM  In rooms for lights out

**Friday, June 15 through Saturday, June 18, 2018**

7:00 AM  Roll call in lobby

7:15 AM  Depart for CUEC

7:30 AM  Arrive at CUEC, eat breakfast

8:00 AM  Prepare riding assignments

8:30 AM  First riding session starts

9:00 AM  Riding lessons/auditing of riding sessions

12:00 PM  Depart for campus; lunch; and free time

5:15 PM  Dinner at campus dining hall

5:45 PM  Depart for CUEC

6:00 PM  Arrive at CUEC, prepare riding assignments

6:30 PM  First riding session starts

6:45 PM  Riding lessons/auditing of riding sessions

8:00 PM  Put up horses, clean tack, etc.
9:00 PM  Depart for campus
10:30 PM  In rooms for lights out

**Sunday, June 17, 2018**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>7:00 AM</td>
<td>Roll call in lobby and load luggage</td>
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<tr>
<td>7:15 AM</td>
<td>Depart for CUEC</td>
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<tr>
<td>7:30 AM</td>
<td>Arrive at CUEC, eat breakfast</td>
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<td>8:00 AM</td>
<td>Prepare for final ride of camp</td>
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<tr>
<td>8:30 AM</td>
<td>First riding session starts</td>
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<tr>
<td>8:45 AM</td>
<td>Riding lessons/auditing of riding sessions</td>
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<tr>
<td>12:00 PM</td>
<td>Lunch at Equine Center</td>
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<tr>
<td>1:00 PM</td>
<td>Parents arrive, Load vehicles with luggage</td>
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<td>1:30 PM</td>
<td>Closing ceremonies</td>
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<tr>
<td>3:00 PM</td>
<td>Camper departure from CUEC</td>
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**Application**

Applications are due to be postmarked by **May 1, 2018**. Applicants are strongly encouraged to apply before the deadline as space is limited to 10 campers.

If you have questions regarding your IHSA placement form, contact us cuec@clemson.edu.

Upon confirmation of acceptance into the Tigers Choice Equestrian Camp, the following can be mailed or remitted at camp check-in.

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<thead>
<tr>
<th>Name __________________________</th>
<th>Birthdate __________________________</th>
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<tr>
<td>Address ________________________</td>
<td>Age ________________________________</td>
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<td>City ___________________ State___ Zip ______</td>
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<td>Male ______ Female ______ Email __________________________</td>
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Parent’s Name __________________________ T Shirt Size: S M L XL XXL Child or Adult (Circle Child or Adult and Size)

Do you have any food allergies or dietary restrictions/preferences? Yes or No

If so please explain:

_______________________________________________________________________________________________________

_______________________________________________________________________________________________________

_______________________________________________________________________________________________________

Riding Level:

Please fill out the IHSA Placement Form below and let us know which class it determines your rider to be eligible for:

_______________________________________________________________________________________________________

Please give a brief description below of your rider’s most recent goals and accomplishments in lessons and/or showing so we know at what level he/she would fit best into during our camp:

_______________________________________________________________________________________________________

_______________________________________________________________________________________________________

_______________________________________________________________________________________________________

I approve of my child participating in the Tiger Talent Equestrian Camp. I understand that my child has agreed to abide by the rules of camp, and if a problem arises, I will make arrangements for him/her to be picked up within reasonable time following notification. I agree that I will pay for any damages caused by my child to the arena, dorms, or other damages caused by my child while at camp.

Parent of Guardian Signature __________________________ Date __________________________
IHSA INDIVIDUAL MEMBERSHIP PLACEMENT FORM

IF YOU HAVE COMPETED IN “recognized shows” – for IHSA purposes that is USEF and USEA for hunter seat, AQHA, NRHA, and APHA for WESTERN – you must submit a printed copy of your competition/points record along with this form. See Rule 8101.A and 9101.A for details.

Student must summarize weeks and/or years of experience in each discipline and category:

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<th>Riding</th>
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<th>USEF Showing</th>
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<th>AQHA Showing</th>
<th>Breed Showing</th>
<th>NRHA Showing</th>
<th>APHA Showing</th>
<th>USDF Showing</th>
<th>USEA Events</th>
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Please refer to the IHSA Rule Book for full descriptions of class requirements. This form indicates suggested placement, but the IHSA Rules always takes precedence in matters of placement.

NOTE: Because of the YES/NO format of this form, the questions in each section are NOT INTENDED to always match the class description of that same section. Rather, a “YES” answer in a section in many cases is affirmation of your being OVER-qualified for the class description of the next lower class.

The FIRST division in which you answer “yes” will indicate initial rider placement.
ALL OF THE FOLLOWING QUESTIONS MUST BE ANSWERED FOR BOTH HUNTER SEAT AND WESTERN DIVISIONS, EVEN IF YOU ARE ONLY COMPETING IN ONE DIVISION. Please refer to Rule VIII, 8100-8202 and Rule IX 9100-9202 of IHSA Rules for exact class qualifications. Note that there is no crossover rule – flat, fences, western are placed by this form independently of each other based on the rulebook. Novice fences riders must be originally placed at least in novice flat level.

Notes: (from IHSA Rule Book Rule 8101)

- Recognized competitions for Hunter Seat riders include any competition that is sanctioned by BOTH United States Equestrian (USEF) and United States Hunter Jumper Association (USHJA); or by both USEF and the United States Eventing Association (USEA); or by both USEF and the United States Dressage Federation (USDF). Recognized competitions for Western riders include any competition that is sanctioned by the American Quarter Horse Association (AQHA), National Reining Horse Association (NRHA); and/or American Paint Horse Association (APHA) only in classes in which National point records are kept.

- RE: “instruction”: any number of lessons taken within a week (Monday-Sunday) constitutes a week of instruction.

- References to “hunter seat equitation classes” are any classes that are judged on hunter seat equitation specifically – NOT hunters (or jumpers).

- For any association jumping class that is run within a height range, the maximum allowable height will be recognized for IHSA (placement purposes)

- References to “international competitions” are for riders who are entering the IHSA with only International experience will need to (follow the corresponding fence heights and ribbons won from competitions that are recognized/sanctioned by that country’s (governing body).

- References to “academic year” for IHSA purposes means any two consecutive semesters.

- Open Flat and Fences Hunter Seat riders may not be placed lower than Novice Western Horsemanship.

- All class descriptions refer to the guidelines specified in Rule VIII 8100-8202 and Rule IX 9100-9202.

- Rule 1202B: ALL hunter seat riders MUST be members of USHJA – at least at the “collegiate” level.

Class 8 – Open Hunter Seat Equitation over Fences Open riders over fences are those who have won more than 6 classes over fences 3’6” or higher in recognized competitions.

Have you won more than six blue ribbons in classes over fences 3’6” or higher in recognized competitions (refer to the above description of “recognized” competitions)?

YES  NO
Class 7 – Open Hunter Seat Equitation on the Flat (Open riders on the flat are those who have won more than 10 equitation classes on the flat in recognized competitions.)

Have you won more than 10 hunter seat equitation classes on the flat in recognized competitions? (YES NO)

Class 16 – Reining Are you eligible for Class 15 Open Horsemanship? YES NO

Class 15 - Open Western Horsemanship Open Riders are those who have finished in Top Five in ANY non-gaited breed National/World Championship, or finished in the top 10 of the AQHA/APHA/NRHA World/Congress Championship in a western class excluding roping, games, halter, showmanship or novice classes.

Have you ever finished in the Top Five in ANY non-gaited breed National/World Championship in a western class excluding roping, games, halter, showmanship or novice classes? YES NO

Have you ever finished in the Top Ten of the AQHA/APHA/NRHA World/Congress Championship in a western class excluding roping, games, halter, showmanship or novice classes? YES NO

Class 6 – Intermediate Hunter Seat Equitation over Fences
Intermediate riders over fences are those who have won no more than 6 classes over fences at 3'6" or higher in recognized competitions.

Have you won more than a total of 6 blue ribbons in classes over fences 3', 3'3", 3'6" or higher in recognized competitions? YES NO

Class 5 – Intermediate Hunter Seat Equitation on the Flat
Intermediate riders on the flat are those who have won 6-10 equitation classes on the flat in recognized competitions.

Have you won more than 5 hunter seat equitation classes on the flat in recognized competitions? YES NO

Did you answer “YES” to any question in the “Class 8” section above? YES NO

Class 14 - Advanced Western Horsemanship Advanced riders are those who have won more than 5 blue Western Horsemanship ribbons in recognized competitions in classes of five or more riders, or have earned 26 or more points from any breed association, or have competed in an AQHA/APHA/NRHA World Championship or finished in the Year end Top three in state or affiliate AQHA/APHA/NRHA association, in a western division in western classes excluding roping, games, halter, showmanship or novice classes.

Have you won more than 5 blue western horsemanship ribbons in recognized competitions in classes of five or more riders? YES NO

Have you earned 26 or more points from any breed association in western classes excluding roping, games, halter, showmanship or “novice” division classes? YES NO

Have you competed in an AQHA/APHA/NRHA World Championship in a western division excluding roping, games, halter, showmanship or novice classes? YES NO
Have you finished in the Year End Top Three in state or affiliate AQHA/APHA/NRHA association in a western division excluding roping, games, halter, showmanship or novice classes?  YES  NO

NOTE: TO BE ELIGIBLE TO COMPETE IN IHSA NOVICE OVER FENCES DIVISION, YOU MUST HAVE AT LEAST SIX MONTHS CONTINUOUS AND PROFESSIONAL INSTRUCTION OVER FENCES WITHIN THE PAST YEAR.

Class 4 – Novice Hunter Seat Equitation over Fences

Novice riders over fences are those who have won no more than 6 classes over fences 3’ or higher in recognized competitions.

Have you competed over fences higher than 3’ in ANY competition, recognized or not?  YES  NO

Class 3 – Novice Hunter Seat Equitation on the Flat

Novice riders on the flat are those who have won no more than 5 equitation classes on the flat in recognized competitions.

Have you had at least 6 months continuous professional instruction over fences within the past year? (Answer does not by itself place you into Novice.)  YES  NO
Have you competed in a “recognized” USEF and/or USEA competition?  YES  NO
Have you competed over fences higher than 3’ in ANY competition, recognized or not?  YES  NO
Did you answer “YES” to any question in the “Class 6 or Class 4” sections above?  YES  NO

Class 13 - Novice Western Horsemanship  Novice riders are those who have competed in mounted classes in recognized competitions to include any western class and who have not earned more than 25 points from any breed association in western classes, excluding roping, games, halter, showmanship, non-loping classes, or “novice” division classes.

Have you competed in mounted classes in a “recognized” competition?  YES  NO
Did you answer “YES” to any question in Class 7 or 8 above?  YES  NO

Class 2B – Walk-Trot-Canter Hunter Seat Equitation

Walk-Trot-Canter riders are those who have not competed in any over fences higher than 3’ in any competition, nor have these riders competed in recognized USEF and/or USEA competitions.

Have you competed over fences higher than 18” in ANY competition?  YES  NO

Class 2A – Beginning Walk-Trot-Canter Hunter Seat Equitation

Beginning Walk-Trot-Canter riders are those who have had more than 24 weeks of instruction and who have not competed in a mounted competition that required them to jump more than eighteen inches.
Have you had more than 24 weeks of instruction in any discipline?  

Have you ever competed in ANY mounted competition that required you to canter or lope?  

**Class 12B - Intermediate II Western Horsemanship** Intermediate II riders for class 12B are those who have competed in non-recognized competitions which required them to lope or canter.

Have you competed in any mounted competition that required you to canter or lope?  

**Class 12A – Intermediate I Western Horsemanship** Intermediate I riders are those who have had more than 24 weeks of instruction and who have not competed in a mounted competition that required them to lope or canter. Once the Intermediate I rider has accumulated 18 points, s/he must move to Intermediate II.

Have you had more than 24 weeks of instruction in any discipline?  

**Class 1 – Walk-Trot Hunter Seat Equitation**  
Walk-Trot riders are those who have had no more than 24 weeks of instruction and who have not competed in a mounted competition that required them to canter or lope. Riders have two years of eligibility starting with their initial completion of the online individual membership form.

Have you had less than 24 weeks of instruction in any discipline?  

**Class 11 – Beginner Western Horsemanship** Beginner riders are those who have had no more than 24 weeks of instruction and who have not competed in a mounted competition which required them to canter or lope. Not open to new IHSA riders eligible for Class 2A or above.

Have you had less than 24 weeks of instruction in any discipline?  

*NOTE: If you compete at a canter in one IHSA discipline you MAY NOT START in the walk-trot division in the other discipline. (Rule 8102B)*
Clemson University Parental Permission Form and Release of Liability for Youth Camps or Programs

I, ____________________________________________, am the parent and/or legal guardian of ________________________________________________, a minor child under the age of 18 years. I would like to have my child participate in the following CAMP/PROGRAM at Clemson University (UNIVERSITY): Tigers Choice Equestrian Camp, which will take place on June 14-17, 2018.

In consideration for my child being allowed to participate in this CAMP/PROGRAM, I the undersigned, acknowledge, appreciate and agree that:

1. This CAMP/PROGRAM affords my child the opportunity to participate in activities, including, but not limited to: Tiger Talent Equestrian Camp. There are inherent risks involved with these activities. I choose to voluntarily allow my child to participate in this CAMP/PROGRAM. I voluntarily assume full responsibility for any risk of loss, property damage or personal injury, including death, which may be sustained by my child as a result of his/her participation.

2. I certify that I have adequate health insurance necessary to provide for and pay for any medical costs that may directly or indirectly result from my child’s participation in this CAMP/PROGRAM. I agree to pay for any medical costs that exceed the limits of my insurance coverage.

3. I understand that this CAMP/PROGRAM is physically strenuous and I know of no medical reason why my child should not participate.

4. I hereby release, waive, and discharge Clemson University and its Board of Trustees, its officers, agents, employees and representatives from all claims, demands, liabilities, rights and causes of action of whatever kind or nature, that may result from or occur during my child’s participation in this CAMP/PROGRAM, whether caused by negligence of the UNIVERSITY, its Board of Trustees, officers, agents, employees or representatives or otherwise. I also agree to indemnify and hold harmless the UNIVERSITY for any loss, liability, damage or costs, including court costs and attorney’s fees that may occur as a result of my or my child’s negligent or intentional act or omission while participating in this CAMP/PROGRAM.

I HAVE CAREFULLY READ THIS PERMISSION AND RELEASE OF LIABILITY AND HAVE HAD SUFFICIENT TIME TO SEEK EXPLANATION OF THE PROVISIONS CONTAINED ABOVE. AFTER CAREFUL CONSIDERATION, I SIGN THIS DOCUMENT VOLUNTARILY AND WITHOUT ANY INDUCEMENT.

______________________________________________                                             ______________
Signature of Parent and/or Legal Guardian

Date
Clemson University

Acknowledgement of Responsibility and Indemnification Form for Minors – Summer Programs

I, ______________________ (print full name of parent or legal guardian) understand that the participation of my child or ward (hereafter the "participant"), ______________________ (print full name of minor) in a Clemson University summer program to be housed on the Clemson University campus from _____________(date) to ____________(date) requires my agreement to certain conditions. In consideration of the participant’s inclusion in such a program, I hereby understand, acknowledge and agree to the following terms and conditions:

(1) I am the legal parent or guardian of the participant named above.

(2) I agree to hold Clemson University, its board of trustees, officers, directors, administrators, employees, representatives, masters, servants, agents, volunteers, successors, and assigns (hereafter, the “University”) harmless in regards to any legal claim or financial obligation for any participant’s personal property that may have been lost, damaged, or stolen during the summer program. Further, I understand that all participants in the University’s summer programs are encouraged to carry appropriate insurance to cover such losses.

(3) I am responsible for the condition of the residence space assigned to the participant and shall reimburse the University for any and all damage to the space as well as any damage to or loss of fixtures, furnishings, or properties furnished under the contract. Further, I acknowledge that no alterations may be made to the residence space, its fixtures or furnishings.

(4) I agree that the participant will take every precaution to assure that communal areas including, but not limited to, baths, stairwells, elevators, lounges, and kitchens are not abused. I will reimburse the University for any damage caused by the participant to communal property, the participant’s residential space, or to any other University property. Further, I agree to pay the prorated repair and/or replacement costs on behalf of the participant. In halls or areas where the University has determined that there is abuse or destruction of University property and the responsible individual(s) cannot be identified, all summer programs participants assigned to the building in which the common space is located may be held responsible for paying a prorated portion of repair and/or replacement costs. In such event, I agree to pay the prorated repair and/or replacement costs on behalf of the participant.

(5) I understand that I am responsible for any key issued to the participant. Keys are issued at check-in. Keys must be returned when occupancy is terminated. If a key is lost or not returned when occupancy is terminated, the lock will be re-cored and new keys will be made. The cost for these services is $75 per key/key fob lost and will be charged to the participant. All keys are property of the University and bear the statement “State of S.C., Do Not Duplicate.” Those violating this provision, or who possess keys other than the one assigned to them are subject to eviction from University housing.

(6) I agree that the participant will abide by the University Housing Summer Programs residency rules and local, state and federal laws. I understand that the participant will be immediately removed for possession or use of illegal substances, illegal possession or use of alcoholic beverages, destruction of property or disruptive behavior. Smoking is prohibited in all University housing facilities. I understand that the University may remove the participant for non-compliance with University Housing Summer Programs residency rules or local, state and/or federal law.

(7) I hereby agree to indemnify and hold the University harmless from and against any and all liabilities, claims, actions, damages, costs and expenses of any nature arising out of, related to, or in any way connected with participant’s inclusion in the University’s summer programs including by way of example, but not limited to, all attorneys’ fees, costs of court, and the costs and expenses of other professionals and disbursements up through and including any appeal.

REQUIRED SIGNATURE

Participant Name___________________________________________

Parent or Legal Guardian Name___________________________________________

Parent or Legal Guardian Signature___________________________________________

Date ___________________________
Photography Consent/Model Release Form
For Minor Children (under 18)

I, ____________________________________________________ , parent or legal guardian of________________________
(print parent or guardian name) (child’s name)

Do hereby grant permission to the Clemson University Tigers Choice Equestrian Camp and its employees or representatives, to
take and use: photographs, video and/or digital images of my child for use in promotional or educational materials pertinent
to the program as follows:

• In printed publications or materials
• In electronic publications or presentations
• On the Clemson University website (www.clemson.edu)

I agree that my child’s identity (please initial one):
_____ may be revealed
_____ may not be revealed

in descriptive text or commentary in connection with the image(s). I authorize the use of these images indefinitely without
compensation to me. All negatives, positives, prints, digital reproductions and video shall be the property of Clemson
University.

________________________________________
Name of parent/ legal guardian

PLEASE PRINT

________________________________________
Signature of parent/ legal guardian

________________________________________
Date

________________________________________
Address

________________________________________
City, State, Zip
CLEMSON UNIVERSITY YOUTH CAMP/PROGRAM EXAMINATION FORM
Tigers Choice Equestrian Camp

THE FIRST PAGE AND TOP OF SECOND PAGE TO BE COMPLETED BY PARENT OR GUARDIAN. FORM MUST BE SIGNED AND DATED (SEE PARENT’S AUTHORIZATION & PERMISSION TO TREAT)

Participant Name___________________________________________________________________________________

Last First Initial

Birth Date_________________ Sex__________ Age_______ Social Security # ____________________________________________________________________________

Parent or Guardian (or Spouse)_________________________________________________________________________

Phone: Day ( )________________ Evening ( )____________ Cell ( )________________

Home Address _____________________________________________________________________________________

If not available in an emergency, notify:
1. ____________________________________ Relationship to camper _____________________________
   Name __________________________________________________________________________________________
   Home Phone Work Phone Cell Phone
2. ______________________________________________ Relationship to camper _____________________________
   Name __________________________________________________________________________________________
   Home Phone Work Phone Cell Phone

HEALTH HISTORY: (Check if the participant has had any of the following- giving approximate date where applicable)

Ear Infections ___________.

Asthma ______________.

Seizures ___________.

Diabetes ______________.

Behavior ______________.

Chicken Pox ___________.

Rheumatic Fever ___________.

Chest Pain/passing out with exertion ___________.

ALLERGIES:

Hay Fever ___________.

Ivy Poisoning, etc. ___________.

Insect Stings ___________.

Penicillin ___________.

Other Drugs ___________.

Details of Above (frequency, severity, triggers) and include any additional medication or food allergies:
__________________________________________________________________________
__________________________________________________________________________

Operations or Serious Injuries (Dates) __________________________________________________________________________

Chronic or Recurring Illness __________________________________________________________________________

SUGGESTIONS FROM PARENTS:________________________________________________________________

IMMUNIZATION RECORD…CAMPERS CANNOT BE ACCEPTED WITHOUT THIS INFORMATION

Required immunizations must be determined locally. This is a record of dates of basic immunizations and most recent booster doses.

DTP Series ___________ booster ___________ Tetanus booster (within the last 10 years) ___________

Polio IPV ___________ booster ___________ MMR ____________________________________________

Hepatitis B ___________ booster ___________ Varicella (chicken pox) ____________________________

Other state or municipal examinations required (if any)________________________________________________________

__________________________________________________________________________
Medications Being Taken – to be completed and signed by parent or legal guardian

☐ This person takes No medication on a routine basis
☐ This person takes medication as follows (attach additional pages if needed)

<table>
<thead>
<tr>
<th>Medicine:</th>
<th>Dosage:</th>
<th>Time taken each day:</th>
<th>Reason for taking:</th>
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*PARENT AUTHORIZATION & PERMISSION TO TREAT: This health history is correct so far as I know, and the person herein described has permission to engage in all prescribed camp activities, except as noted by me and the examining physician. I hereby give permission to the medical personnel selected by the camp director to provide routine health care; to administer medications; to order X-rays, routine tests, treatment; to release any records necessary for insurance purpose; and to provide or arrange necessary related transportation for me/or my child. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the camp director to secure and administer treatment, including hospitalization, for the person named above.

Parent/Guardian Signature ____________________________________________________________
Date___________________________

*THIS MUST BE SIGNED FOR CHILD TO ATTEND CAMP

MEDICAL EXAMINATION to be completed and signed by license medical personnel. This portion of the form may be substituted with a copy of a medical physical document that has been taken within the past 24 months.

Hgt. ___________ Wt. ___________ B. P. ___________

The applicant is under the care of a physician for the following conditions:

_________________________________________________________________________________

(For Girls and Women) Has this person menstruated? __________ If so, is her menstrual history normal? __________

Special considerations:______________________________________________________________

_________________________________________________________________________________

Recommendations and restrictions while in camp.

Treatment to be continued at camp________________________________________________________________________________

Known allergies______________________________________________________________________________________________

Special meal plans or diet restrictions__________________________________________________________________________

Medications to be administered at camp (name, dosage, frequency if different from above)

________________________________________________________________________________
Limitation or restriction on camp activities ________________________________________________

Additional information for camp health care personnel ____________________________________

I examined this individual on ____________ (date).
In my opinion, the applicant is able to participate in an active camp program.

SIGNATURE OF LICENSED MEDICAL PERSONNEL

__________________________________________________________

Print
Name ____________________________ Title ____________________________

Address ______________________________________________________
Telephone ____________________________________________________
Date ________
PERMISSION TO ADMINISTER MEDICATION

Tigers Choice Equestrian Camp

____________________________________________________
has my permission to receive

(child’s name)

____________________________________________
(drug name) (dose) (time of day/frequency)

Potential side effects (if any):

_________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Prescribing physician (name, address and phone #):

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Parent Name:

____________________________________________________________________________________

Signature_______________________________________
Date_____________________________________________
Clemson University
Assumption of Risk and Release from Liability

Parent/Legal Guardian Name: _________________________________
Child Participant/Rider Name: _____________________________________

I acknowledge and agree that I am the parent or legal guardian of the minor child identified above. I would like my child to participate in the following Clemson University Program (hereinafter ACTIVITY): Tigers Choice Equestrian Camp which is sponsored/organized by the Clemson University Equine Center and will take place on the following date(s) 6/14/2018-6/17/2018.

In consideration for my child being allowed to participate in this ACTIVITY, I the undersigned, acknowledge, appreciate and agree that:

1. I have an accident and health insurance policy that will provide coverage for any injury or illness that may occur during my child’s participation in this ACTIVITY. I understand that I am responsible for any and all costs relating to medical treatment or care of injuries or illness that my child may suffer as a result of, or while participating in, the ACTIVITY.

2. I understand that this ACTIVITY is physically strenuous and I know of no medical reason why my child should not participate.

3. I agree that my child will comply with the Clemson University policy on Headgear Safety Equipment, which is attached.

4. Equine activity, is an inherently dangerous activity, because of but not limited to: the propensity of the equine to behave in ways that may result in injury, harm or death to people or other equine; the unpredictability of an equine’s reaction to sound, sudden movement, an unfamiliar object, a person or another animal; certain hazards such as surface and subsurface conditions; and collisions with other equine or objects; 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 the participant’s ability. KNOWING AND UNDERSTANDING THESE RISKS, I HEREBY RELEASE AND HOLD HARMLESS CLEMSON UNIVERSITY AND ALL OF THEIR TRUSTEES, EMPLOYEES, STUDENTS AND VOLUNTEERS FROM ANY AND ALL CLAIMS, DEMANDS, SUITS OR CAUSES OF ACTION FOR DAMAGES SUFFERED AS A RESULT OF AN INJURY, INCLUDING DEATH, OR PROPERTY DAMAGE INCURRED BY MY CHILD WHILE SAID CHILD IS PARTICIPATING IN THE ABOVE REFERENCED ACTIVITY.

5. I also agree to indemnify and hold harmless Clemson University and its agents and representatives for any loss, liability, damage or costs, including court costs and attorney’s fees that may occur as a result of my or my child’s negligent or intentional act or omission while participating in this ACTIVITY.

I HAVE CAREFULLY READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AND HAVE HAD SUFFICIENT TIME TO SEEK EXPLANATION OF THE PROVISIONS CONTAINED ABOVE. AFTER CAREFUL CONSIDERATION, I SIGN THIS DOCUMENT VOLUNTARILY AND WITHOUT ANY INDUCEMENT ON BEHALF OF MY CHILD.

___________________________________________________

__________________________
Clemson University Youth Program Behavior Agreement

The Code of Conduct outlined below is in effect for all youth activities involving Clemson University Cooperative Extension Service and the Department of Youth Development. It applies to all participants in youth program activities, with participants defined as members of any age or grade, all other registered youth and adults, and all other individuals who take part and/or attend youth program events. Participants who fail to adhere to the Code of Conduct may be subject to a range of disciplinary actions. Immediate corrective action will be taken to ensure the safety and welfare of all participants at the event. Additional disciplinary action may be taken upon further investigation of the infraction or incident. Participants in county events shall be subject to policies developed at the county level. Participants in state and national events shall be subject to the policy and process outlined below.

If an individual continually disrupts the group or engages in illegal behavior, he or she will be given an opportunity to discuss the problem with the chaperones before more drastic action is taken. If, after discussion, the behavior continues, or in the opinion of the chaperones it would be detrimental for the individual to continue with the group, **he or she will be sent home at the participant’s expense.** Also, **participants/parents will be financially responsible for any damage caused by the participant.**

**Code of Conduct**

1. The health, safety, and welfare of others must be respected at all times.
2. Appropriate language and behavior are expected at all times. Profanity, foul or abusive language, inflammatory statements, derogatory comments, or physical altercations toward any group or individual are not permitted.
3. Participants are expected to be present and participate at all scheduled program activities. Participants are required to wear nametags when dispensed.
4. All participants are expected to be on the site of the event at all times and to participate in assigned activities. Unauthorized use of vehicles during an event is prohibited.
5. Participants are responsible for following the instructions of all program staff and event chaperones.
6. All behavior or language of a sexual nature at youth program events in inappropriate and unacceptable. Dignified and respectful behavior is expected at all times.
7. Curfew hours must be strictly followed.
8. Behavior during unscheduled free time is subject to the supervision of program staff and chaperones.
9. Dress code standards previously set for the event must be met by all participants (i.e., no sexually suggestive, culturally insensitive, tobacco or alcohol industry sponsored shirts, inappropriately cut shirts, shorts, pants or skirts, etc.).
10. Possession, distribution, or use of alcoholic beverages or illegal drugs is prohibited. Prescription drugs and over-the-counter medications may be dispensed by adult chaperones only with written authorization provided by the parent/guardian on the Event Permission Form for Youth filed for the event.
11. With the concern for the well-being of self and others, smoking and the use of other tobacco products is prohibited.
12. Care and respect for property, personal and institutional, is expected at all times. Theft, possession of missing property or damage to property is prohibited.
13. Unauthorized possession, distribution or use of weapons, ammunition or fireworks is prohibited.
14. Honesty is expected at all times from program participants.
15. Dishonesty, cheating, plagiarism and forgery are inappropriate actions.

I HAVE READ the Behavior Agreement and Code of Conduct above and discussed it with my son/daughter. I understand and agree to the conditions set forth. I accept the cost and responsibility of having my son/daughter returned in the event it is necessary.

Signature of participant: _____________________________ Date: __________________
Signature of parent/guardian: ____________________________ Date: __________________