



## 2026 Farm Camp Registration

Child's Name: \_\_\_\_\_ Parent Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age at Camp: \_\_\_\_\_ School: \_\_\_\_\_ Next Grade: \_\_\_\_\_

Gender:  Male  Female Group Child w/: \_\_\_\_\_ T-Shirt Size (Note Youth or Adult Size): \_\_\_\_\_

Mother/Guardian: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_ Work #: \_\_\_\_\_

Father/Guardian: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_ Work #: \_\_\_\_\_

Has your child attended farm camp before? If yes, how many years? \_\_\_\_\_

Does your child have any special needs or medical conditions that we need to be aware of for camp (list all here)? \_\_\_\_\_  
If yes, have you completed the inclusion request form? \_\_\_\_\_

How did you first hear about Hunt Club's Summer Farm Camp?  Social Media  Farm Visit  Brochure  Website  School  Friend  Staff Member  Other: \_\_\_\_\_

**Camp Sessions:** Please circle each week that you wish your child to participate. There will be a \$25.00 fee for all session changes from original application.

<b>FARM CAMP</b> All Day (Ages 6-12)	<input type="checkbox"/> Week 1 6/8-6/12	<input type="checkbox"/> Week 2 6/15-6/19	<input type="checkbox"/> Week 3 6/22-6/26	<input type="checkbox"/> Week 4 6/29-7/3	<input type="checkbox"/> Week 5 7/6-7/10	<input type="checkbox"/> Week 6 7/13-7/17	<input type="checkbox"/> Week 7 7/20-7/24	<input type="checkbox"/> Week 8 7/27-7/31	<input type="checkbox"/> Week 9 8/3-8/7	<input type="checkbox"/> Week 10 8/10-8/14	<input type="checkbox"/> Week 11 8/17-8/21
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**PLEASE NOTE: Camp is limited to children 6 to 12 years of age. Children may only enroll in a maximum of 5 weeks or 25 program days of summer camp.** Camp Fees: Includes Camp T-shirt & farm membership. Please provide Water, Lunch, a Snack and/or Canteen money daily.

	Rate Calculations	Total Amount Due:	(Office Use Only)
<b>Camp Session Rate:</b>	\$460 x _____ # Weeks		
<b>Early Registration Discount:</b>	Before 12/31/2025 - \$25 x _____ # Weeks	( - )	
	Before 03/31/2026 - \$15 x _____ # Weeks	( - )	
<b>Multi-Session Discount:</b>	- \$20 x _____ # Weeks	( - )	
<b>Multi-Sibling Discount:</b>	- \$15 x _____ # Weeks	( - )	
<b>Canteen Card (snacks from the market; suggested amt \$25-\$40 per week):</b>	Amount on card _____ x _____ # Weeks	( + )	
<b>Extra Camp T-shirt (camper doesn't need to wear everyday):</b>	+ \$15 x _____ # Shirts	( + )	
<b>Deposit (Required for each session reserved. Deducts from total balance)</b>	\$100 x _____ # Weeks	( - )	
<b>Balance Due: May 15, 2026</b>		\$	

A deposit of \$100.00 is required per session. The deposit is NON-REFUNDABLE. Camp balances are due prior to May 15, 2026. Late payment of camp balance may result in the forfeiture of your reservation. You will receive a refund, minus deposit, if cancellation is made 30 days prior to the first day of your selected session. Cancellations within 30 days of session are Non-Refundable. There will be a \$25.00 fee for all session changes. Registrations made after May 15<sup>th</sup> are due in full at the time of registering.

**Payment Methods:**  Cash  Check  Credit Card #: \_\_\_\_\_ Security Code: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Amount to be Charged: \$ \_\_\_\_\_ Authorized Signature: \_\_\_\_\_ Auto Charge Balance 5/15/2026  YES  NO

**\*\*Please Retain a copy for your Federal Income Tax - Child Care Deduction - Hunt Club Farm Tax ID # 541989562\*\***

**Pick-Up Authorization:** List the people who will pick up your child besides guardians listed above. Children will not be released to other people. Emergency password: \_\_\_\_\_

Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Telephone: \_\_\_\_\_

I certify the above information is correct and agree to the terms listed above in this registration application. I understand and am aware that my child will be participating in many physical activities and that the potential for accidents does exist. In consideration of acceptance to Hunt Club Farm's Summer Camp I indemnify and hold harmless Hunt Club Farm, its agents, associates, staff, and board of directors from any and all liability, claims, damage, injury or illness sustained by my child.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**2388 London Bridge Road • Virginia Beach, VA 23456 • Office (757) 427-9520**

# SUMMER FARM CAMP

## 2026 Medical Information: Parent to Complete

Camper's Name:	Date of Birth:	Age:	Weekly Session(s):				
Mother / Legal Guardian / Emergency Contact: Name and Telephone #:							
Father / Legal Guardian / Emergency Contact Name and Telephone #:							
<b>MEDICAL HISTORY:</b>							
Last Exam Date:	Examined By:	Family Physician:					
Child's Height	Child's Weight	Emergency Password:					
<b>CHECK ALL THAT APPLY</b>							
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Epilepsy/Seizure	<input type="checkbox"/> Hypertension	<input type="checkbox"/> Autism/ Asperger's				
<input type="checkbox"/> Asthma/Respiratory Disease	<input type="checkbox"/> Ulcer/Stomach Disease	<input type="checkbox"/> Hemophilia/Bleeding Disease	<input type="checkbox"/> Hepatitis/Liver Disease				
<input type="checkbox"/> Heart Disease	<input type="checkbox"/> Ear Infection	<input type="checkbox"/> HIV/AIDS	<input type="checkbox"/> ADD/ADHD or ODD				
<input type="checkbox"/> Kidney Disease	<input type="checkbox"/> Bowel Disorder	<input type="checkbox"/> Rheumatoid/Lupus	<input type="checkbox"/> Nervous/Mental Disorder				
Other:							
Please Detail Selected:							
List all Previous Surgeries/Major Injuries:							
Allergic reactions to the following:	<input type="checkbox"/> Food	<input type="checkbox"/> Hay Fever	<input type="checkbox"/> Poison Ivy	<input type="checkbox"/> Poison Oak	<input type="checkbox"/> Bee Stings	<input type="checkbox"/> Animals	Other:
The following non-prescription medications are commonly stocked in camp First Aid on an as needed basis to manage illness and injury. Check those items the camper may be given without prior authorization from a parent.							
<input type="checkbox"/> Acetaminophen (Tylenol) <input type="checkbox"/> Ibuprofen (Advil, Motrin) <input type="checkbox"/> Eye Wash (Saline Solution) <input type="checkbox"/> Low Dose Aspirin <input type="checkbox"/> Diphenhydramine (Benadryl) <input type="checkbox"/> Aloe <input type="checkbox"/> Generic cough drops <input type="checkbox"/> Bismuth subsalicylate (Pepto-Bismol) <input type="checkbox"/> Calamine lotion <input type="checkbox"/> Hydrocortisone 1% cream <input type="checkbox"/> Topical antibiotic cream <input type="checkbox"/> Sunscreen <input type="checkbox"/> Lidocaine (Burn Cream) <input type="checkbox"/> Benzocaine & Menthol (Sting Relief)							
<b>Prescription Drugs:</b> Written physician's directions including dosage, frequency and condition, <b>MUST</b> accompany any prescription medications sent to Camp. <u>Medications:</u>							
Any other information that you would like to provide about your child's general health or special needs? Does your child need accommodation?							
I understand that I will be contacted as soon as possible if my child is injured and in need of medical care. If I am not available, please contact:							
Name:		Relation:					
Home #:		Work #:			Alt #:		
Name:		Relation:					
Home #:		Work #:			Alt #:		
(initial) In the event that I am unavailable for the purposes of providing parental consent, I hereby authorize the physician(s) and staff at the medical facility or hospital chosen by Hunt Club Farm to provide such care that includes diagnostic procedures and medical treatment as necessary to my minor child while said child is enrolled in Hunt Club's Summer Farm Camp.							
(initial) I also authorize the release of all x-rays, test results, lab work or any other procedure that would be helpful in the follow-up care of my child. This medical treatment is to be given to my child without any further prior permission from the undersigned. I understand that the consent and authorization herein granted does not include major surgical procedures.							
I, the undersigned, certify the above information is correct and understand that any false or missing information may impact my child's registration for Hunt Club's Summer Farm Camp. I understand that my child can be withdrawn from Camp without refund if the medical information provided is not true or representative of my child's medical conditions. I agree to notify Hunt Club Farm if my child's medical conditions change from the date I sign this form to the time they are in camp.							
I, the undersigned, authorize payment of medical benefits to such medical facility or hospital for any services furnished to my child by the physician. I understand that I am financially responsible for any amount not covered by my insurance contract. I also authorize you to release my insurance company information concerning health care, advice, treatment or supplies provided to my child while attending Hunt Club's Summer Farm Camp. This information will be used for the purpose of evaluating and administering the claim of benefits. This consent is valid for one year from the date indicated. A photocopy of this authorization shall be considered as effective as the original.							
Parent/Guardian Signature				Date			

# SUMMER FARM CAMP

## Camper Profile

Camper Name:	Week(s) #:
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### Camper Section:

Which of the following things would you like to do?

Ride a horse?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Lead llamas through an obstacle course?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Learn how to catch and hold a chicken?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Cuddle with a mini highland cow?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Get muddy with a pig?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Go fishing?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Meet new friends?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

What is your favorite farm animal?

What are you looking forward to most for summer camp?

*(If you are a returning camper, what was your favorite part about camp last year?)*

### Parent Section:

Please share any additional information about your child that may be helpful to our Staff:

## **Hunt Club Farm's Summer Camp Behavior Agreement**

I agree to follow the rules and behavior guidelines of Hunt Club's Summer Farm Camp. Program rules include, but are not limited to the following:

1. I will be respectful of my fellow Camp participants and all program staff. This means that I will speak to others in a respectful manner and tone of voice, I will follow directions, and I will not cause or threaten physical harm towards others. I understand that disrespectful behaviors include, but are not limited to, hitting, punching, kicking, biting, spitting, swearing, lying and refusing to listen to camp & HCF staff.
2. I will be respectful of the HCF grounds and buildings, places we may visit, the animals and the belongings of others. This means that I will not litter, vandalize, steal or destroy items that do not belong to me. I will act in a behavior that will not give a negative image of myself or HCF. I will treat all animals with respect and kindness.
3. I agree to follow all Camp rules including those that are not listed on this behavior agreement.

**Camp Participants:** With a parent, I have read the Hunt Club Farm Summer Camp Behavior Agreement and I agree to follow the rules. I understand that not following these rules will result in consequences to my actions. In some cases, consequences may include not being allowed at Camp for a period (1 day – the rest of the summer) or not being allowed to participate in certain activities.

**Parents:** By signing this document, you are acknowledging that you have read and understand the rules listed above, that the consequences listed below may be imposed at any time, and that you will arrange for your child to be picked up from Camp if the camp staff requests for you to do so. If Hunt Club Farm staff deems necessary due to the severity of a camper's behavior, your camper may be removed from camp on the first occurrence without warning.

**On or After the date listed with signature:**

First Occurrence – The first time an incident happens will result in a phone call home. A Camp Director will explain to parents what happened and that such behavior is not acceptable. In the case where kicking, biting, hitting or other severe behavior occurs, the child may automatically be given one day suspension from the program, with no refund for that day.

Second Occurrence – The second time an incident occurs will result in a second phone call home from a Camp Director. At least one day suspension may be given, if not more (with no refund) and it will be explained to the parents that the next occurrence will result in the child's expulsion without refund.

Third Occurrence – The third incident will result in immediate expulsion from Camp without refund. The Hunt Club Farm Summer Camp Director will make final determination for expulsion.

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Print Name of Camper

Initial

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Date

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Print Name of Parent/Legal Guardian

Signature

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Date

Thank you for your cooperation.

## **Summer Camp & Equine Activity Liability Release, Waiver of Right to Sue and Assumption of all Risks**

For valuable consideration including the opportunities provided by Hunt Club Farm of Virginia Beach, Inc., t/a Hunt Club Farm its owners, employees and any volunteers, or others in anyway associated with Hunt Club Farm, I/we am aware that in addition to the usual dangers and risks inherent in equestrian activities, outdoor sports, animal care, fishing, arts and crafts, water activities and other activities at Hunt Club's Summer Farm Camp, certain additional dangers and risks are present including but not limited to the danger and risk of being in direct contact with farm animals including birds, goats, sheep, cows, llamas, alpacas, rabbits, pigs and equines, being kicked, bitten or scratched, stepped-on, knocked-over, falling, failure of tack, harnesses and/or colliding with camp staff, campers or spectators or being exposed to animal related pathogens. By signing this waiver, I/we freely accept and fully assume responsibility for all such dangers and risks and the possibility of personal injury, death, property damage or loss resulting there from.

In consideration of utilizing Hunt Club of Virginia Beach, Inc. t/a Hunt Club Farm facilities and for other good and valuable consideration, I/we hereby agree as follows:

- 1. TO WAIVE ANY AND ALL CLAIMS** for personal injury including death, illness, and/or property damage that I/we may have against Hunt Club of Virginia Beach, Inc., shareholders, partners, principals, directors, officers, affiliates, agents, employees, contractors, representatives and any volunteers in any way associated with Hunt Club of Virginia Beach, Inc., Summer Farm Camp.
- 2. TO RELEASE HUNT CLUB FARM OF VIRGINIA BEACH FROM ANY AND ALL LIABILITY** for any loss, damage, injury, death, medical or other expense that I/we may suffer or that any other party may suffer as a result of my use of Hunt Club facilities or by my participation in Summer Farm Camp or due to any cause whatsoever.
- 3. TO HOLD HARMLESS AND INDEMNIFY HUNT CLUB FARM OF VIRGINIA BEACH** from any and all liability for any property damage or personal injury to any third party resulting from my use of Hunt Club facilities or by my participation in the activities of horseback riding, water activities, animal care, gardening and other Summer Farm Camp activities.
- 4. THIS RELEASE OF LIABILITY SHALL BE EFFECTIVE AND BINDING** upon my heirs, next of kin, executors, administrators, successors and assigns in the event of my personal injury including death, illness and/or property damage.
- 5. I/WE ADDITIONALLY AGREE** not to take unreasonable risks while participating in horseback riding, water activities, animal care, gardening and other Summer Farm Camp activities, including but not limited to attempting skills or tricks that I am not qualified to perform safely or causing any other participants/spectators unreasonable risk of harm.
- 6. I/WE ADDITIONALLY AGREE** that I/we shall follow correct safety procedures when using Hunt Club Farm's facilities. I/we also expressly grant to the Camp, and any third party authorized by the Camp, the right to film, videotape, photograph, record my voice and make any reproductions of my physical likeness and voice, and the irrevocable right to perpetuity to use, display, and digitally enhance or alter in any manner, such likeness in any media now known or hereafter devised, including, but not limited to, the exhibition and/or online use, broadcast, theatrically or on television, cable or radio, of any motion picture film, video tape, DVD, CD or any Internet service or program in which such likeness may be used or otherwise, or any published articles in which such likeness may be used or otherwise, or any published articles in which such likeness may be printed, used or incorporated, and in the advertising, exploiting and publicizing of the Camp and Camp products.

**I/WE HEREBY CERTIFY** that I/we have read and understand this Release of Liability prior to signing it, and I/we am aware that by signing this Release of Liability I/we am waiving certain legal rights which I/we or my heirs, next of kin, executors, administrators, successors and assigns may have against the Releasees.

This Liability Waiver was made and executed in the State of Virginia and shall be governed by, enforced in and construed in accordance with the laws of the State of Virginia.

I/we acknowledge that in executing this Waiver, I/we are not relying on any inducements, promises, or representations made by Hunt Club Farm of Virginia Beach .

If this Agreement is executed by the undersigned participant for and on behalf of a minor participant named below, the undersigned participant hereby warrants and represents that he is in fact the legal parent or guardian of such minor, with full rights of custody and control; that this Agreement is given on behalf of and is binding upon said minor participant, his heirs, personal representatives, successors and assigns; and the undersigned participant further agrees that his Agreement shall also be as fully binding on the undersigned participant as if it were entered into solely on his own behalf.

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Camper's Name

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Print Name of Parent/Legal Guardian

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Signature of Parent/Legal Guardian

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Date