



La Mariposa
2024
Equestrian Program



DATES
June 24-28
July 28 – Aug. 2

HOURS
8am-12pm
COST
\$550.00/week

**Registration Forms attached.
Complete and return to LMM office, with payment.**

La Mariposa
Summer, 2024
Equestrian Program

Enrollment

My child, _____, would like to participate in
the **2024** Equestrian Program.

Session(s): June 24 - 28 : _____

July 28 – Aug.2 _____

Total Payment: \$ _____ Received: _____

Make checks payable to: La Mariposa Montessori

Extended Day hours: 7:00am – 5:00 pm

Extended Day hours billed at \$10.00/hr. **Prepayment Savings Available.**

No refunds for missed days/sessions.

Equestrian Program

2024

Please read the following document carefully, sign at the bottom and return.

Student Participation in Activities: Parent/Guardian Consent to Participation, Acknowledgement of Risk, Express Assumption of Risk, Waiver and Release of Liability, Indemnification, and Hold Harmless Agreement (“the Agreement”)

I, _____, on behalf of _____ (the “minor child”), of whom I am the parent or legal guardian, understand that during the minor child’s time at La Mariposa Montessori, the minor child will have the option to participate in activities that may include:

- horseback riding
- rafting/kayaking/water sports
- bicycling
- archery
- rock climbing
- hiking
- field trips
- P.E./ track and field
- other indoor and outdoor activities and games, and transportation to and from such activities

In this document, these activities will be collectively referred to as the “activities.”

By my signature below, to the extent legally permitted, **I waive, release, and discharge from all claims and all liabilities, and covenant not to sue** Katrina Holder, La Mariposa Montessori, Inc., Santa Fe Escuela del Sol, its/their agents, managers, employees, or staff (collectively, “the School”), as a result of the minor child’s participation in the activities. I have voluntarily signed this waiver on behalf of the minor child, the minor child’s family, estate, heirs, or assigns.

On behalf of the minor child, I acknowledge that I am aware that the activities can involve serious health risks, risk of injury or death, and may be considered dangerous activities. My minor child’s participation in the activities may expose the minor child to the possible reckless, negligent, or intentional conduct of other participants. On behalf of the minor child, I understand that the hazards associated with these activities cannot be foreseen. On behalf of the minor child, **I assume the risks associated with the minor child’s participation in the activities.**

Indemnity, Guaranty, and Hold Harmless Provisions: I personally assume liability for, and guaranty payment to the School of, and agree to pay, protect, defend and hold the School harmless from and against, and hereby agree to indemnify the School from and against, any and all liabilities, damages, claims, demands, judgments, costs and expenses (including attorneys’ fees), which may be incurred by, or awarded against the School as a result of the minor child’s participation in the activities, to the extent permitted by law.

New Mexico has certain laws that may apply to some of the activities, such as the Equine Liability Act and the Ski Safety Act. Those and other applicable New Mexico laws may supersede the provisions of this Agreement. I agree that if any portion of this Agreement is held invalid or overbroad, the remainder of the Agreement shall continue in full legal force and effect.

Consent to Participation in Activities: By my signature below, I consent to my minor child's participation in the activities. The exceptions to the activities covered by my consent are as follows: [if there are no exceptions, write "none;" otherwise, write the name of the activity to which consent is not given] _____

I HAVE READ AND FULLY UNDERSTAND THE ABOVE ACKNOWLEDGEMENT OF RISK, EXPRESS ASSUMPTION OF RISK, WAIVER AND RELEASE OF LIABILITY, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT AND FULLY UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS ON BEHALF OF MYSELF AND MY MINOR CHILD BY VOLUNTARILY SIGNING IT. I HAVE READ THIS DOCUMENT CAREFULLY BEFORE SIGNING IT AND ACKNOWLEDGE THAT I HAVE HAD AN OPPORTUNITY TO CONSULT AN ATTORNEY CONCERNING THE LEGAL EFFECT OF THIS DOCUMENT.

Parent/Guardian's Printed Name _____ Date _____

Parent/Guardian's Signature _____

STATE OF _____)

) ss.

COUNTY OF _____)

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____.

Notary Public

My commission expires: _____

~La Mariposa Montessori~

18 Puesta del Sol, Santa Fe, NM 87508
(505) 995-9659

EMERGENCY RELEASE FORM

2024 Summer Program

Child's Name _____

Parents' Names: _____

Best Contact # _____ Email _____

_____ Email _____

EMERGENCY CONTACTS: (Must be 2 alternate individuals; other than parents or step parents.)

Name

Phone

Name

Phone

I, _____, authorize Katrina Holder, La Mariposa Montessori, SF Escuela del Sol and Staff to seek medical attention for my child, _____, in case of a medical emergency.

In case of a medical emergency, 911 will be called and your child will be transported to the nearest hospital.

List any allergies, dietary restrictions, or medical conditions that may require intervention or support.

List any fears, concerns or sleep patterns that may require special attention:

Parent Signature _____

Date _____

~La Mariposa Montessori~

La Mariposa's Summer Equestrian Program will be a fun and exciting adventure for each of us! It is, however, essential that each student be prepared for what is expected. Please review the following Student Code of Conduct and sign the required release.

ELEMENTARY STUDENTS - CODE OF CONDUCT

2024 Summer Equestrian Program

- Students will be accountable and responsible for their choices and behaviors.
- Students will be expected to conduct themselves exceptionally well at all times.
- Students will use quiet voices while inside classroom buildings.
- Students will respond immediately and with respect and willingness to all requests made by the supervising adults.
- Students will be considerate of those around them and refrain from behaviors which are inconsiderate, annoying, irritating or distracting to group leaders or peers.
- Students will remain with their group and group leader at all times and not stray away for any reason.
- Students will not consume candy or high sugar content foods while at La Mariposa.

Students,

Please read, sign and return the Student Code of Conduct.

I understand and hereby agree to each of the terms and conditions as set forth in the Student Code of Conduct. If I should, for any reason, compromise my safety, or the safety of others, or in any way jeopardize the well-being of another, I shall be immediately excused from La Mariposa and sent home.

Signature _____ **Date** _____

Parents,

Please read the Student Code of Conduct and complete and sign the agreement below.

Should any unforeseen behavior or health problem arise during any portion of the day, the supervising chaperone has our permission and support to dismiss our child, _____, from La Mariposa and send him/her home.

Parent Signature _____ **Date** _____

Parent Signature _____ **Date** _____