



*CAMPS ARE SUBJECT TO COVID-19 PROTOCOL

CAROLINA EQUESTRIAN CAMP

2023 COLLEGE PREPARATORY CAMP APPLICATION

APRIL 29-30

MAY 13-14

OUR CAMPS ARE OPEN TO ANY AND ALL ENTRANTS LIMITED ONLY BY NUMBERS, AGE, GRADE LEVEL, AND/OR GENDER. IN THE ESSENCE OF SAFETY FOR CAMPERS, COUNSELORS, AND HORSES, IT IS STRONGLY RECOMMENDED THAT PROSPECTIVE CAMPERS BE ABLE TO SAFELY JUMP A HEIGHT OF 2'6" IF PARTICIPATING IN THE JUMPING SEAT CAMP.

CAMPER INFORMATION (PLEASE PRINT CLEARLY OR TYPE)

NAME	AGE, HEIGHT
ADDRESS	GRADE
CITY	PHONE NUMBER
STATE & ZIP CODE	BARN NAME
EMAIL	TRAINER'S NAME
PARENT NAME	TRAINER'S PHONE NUMBER
PARENT NAME	ALL CORRESPONDENCE CONCERNING CAMP WILL BE SENT TO EMAIL ADDRESS PROVIDED
PARENT(S) EMAIL	

REGISTRATION OPTIONS

PLEASE SELECT FROM THE FOLLOWING OPTIONS:

CAMP DATE APRIL 29-30, 2023

MAY 13-14, 2023

RIDING INFORMATION PLEASE CHECK YOUR RIDING DISCIPLINE FOR CLINIC

JUMPING SEAT 2'6"

3'

3'6"

WESTERN HORSEMANSHIP

REINING

HORSE RENTAL
\$850.00

**WE HAVE A LIMITED NUMBER OF and RENT HORSES ON A FIRST-COME, FIRST-SERVED BASIS.*

BRING YOUR OWN HORSE **INCLUDES STABLING*
\$700.00

MARE

GELDING

HEIGHT _____

APPROXIMATE ARRIVAL
DATE/ TIME: _____

T-SHIRT SIZE ADULT SMALL

ADULT MEDIUM

ADULT LARGE

ADULT XL

DESCRIBE SHOW EXPERIENCE

PLEASE INCLUDE DISCIPLINE, SHOW RATING (IF WESTERN - OPEN, BREED; HUNTER/JUMPER - LOCAL, SCHOOLING, A-CIRCUIT) AND THE NUMBER OF PRACTICE LESSON HOURS PER WEEK. BE SPECIFIC.

EACH WESTERN RIDER **MUST HAVE** SHOW EXPERIENCE IN THE CORRESPONDING DISCIPLINE THEY WISH TO PARTICIPATE IN.

PLEASE SEE PAGE 2 FOR FURTHER CAMP DETAILS

****A REGISTRATION FEE OF \$200 IS DUE WITH YOUR APPLICATION.
NO SPOT WILL BE HELD UNTIL DEPOSIT IS RECEIVED.**

CAMPER APPLICATIONS ARE TAKEN ON A FIRST-COME, FIRST-SERVED BASIS.
BALANCE OF WEEKEND CAMP FEE IS DUE AT REGISTRATION ON **THE FIRST DAY OF CAMP**

REFUND POLICY \$200 DEPOSIT IS NON-REFUNDABLE UNLESS CAMPS ARE FULL WITH A WAITING LIST.

PLEASE RETURN REGISTRATION FORM, DEPOSIT, INSURANCE INFORMATION, & RELEASE TO:

BOO MAJOR | CAROLINA EQUESTRIAN CAMP

1304 HEYWARD STREET, COLUMBIA SC 29208

OR, SCAN AND EMAIL TO FSMAJOR@SC.EDU

**MAKE CHECKS PAYABLE TO
CAROLINA EQUESTRIAN CAMP**

YOU WILL RECEIVE AN EMAIL CONFIRMATION ONCE YOUR REGISTRATION IS CONFIRMED.

QUESTIONS? CONTACT - BOO MAJOR - CAMP COORDINATOR - FSMAJOR@SC.EDU

CAMP SCHEDULE

WEEK ONE

SATURDAY, 29 APRIL 2023

645AM - REGISTRATION

7AM - 4PM - CAMP INSTRUCTION

SUNDAY, 30 APRIL 2023

7AM - COACHES PANEL DISCUSSION

830AM - 3PM - CAMP INSTRUCTION

***LUNCH WILL BE PROVIDED FOR CAMPERS BOTH DAYS.**

WEEK TWO

SATURDAY, 13 MAY 2023

645AM - REGISTRATION

7AM - 4PM - CAMP INSTRUCTION

SUNDAY, 14 MAY 2023

7AM - COACHES PANEL DISCUSSION

830AM - 3PM - CAMP INSTRUCTION

CAMP LOCATION ONE WOOD FARM

1201 SYRUP MILL ROAD, BLYTHEWOOD, SOUTH CAROLINA 29016

WHAT TO EXPECT?

DURING EACH TWO-DAY CAMP OUR COACHING STAFF WILL WORK ALONGSIDE RIDERS TO FURTHER THEIR FOUNDATION AND UNDERSTANDING OF THE SKILLS NEEDED TO CREATE SUCCESSFUL RIDING IN THE NCEA COLLEGIATE FORMAT! OUR CAMP IS THE PERFECT OPPORTUNITY TO LEARN ABOUT COLLEGIATE RIDING AND LIFE AS A STUDENT-ATHLETE, INCLUDES A TOUR OF OUR FACILITY, LUNCH EACH DAY, A CAROLINA EQUESTRIAN CAMP T-SHIRT, AND GIVES PARTICIPANTS THE CHANCE TO GET A FIRST-HAND EXPERIENCE AT OUR TOP D1 EQUESTRIAN PROGRAM AND WITHIN THE SOUTHEASTERN CONFERENCE! RIDERS WILL HAVE THE OPPORTUNITY TO RIDE MULTIPLE SOUTH CAROLINA HORSES GAINING VALUABLE EXPERIENCE ON DIFFERENT TYPES OF MOUNTS AND WILL BE REQUIRED TO CARE FOR EACH ASSIGNED HORSE.

CAMP COACH BIOS CAN BE FOUND AT: WWW.GAMECOCKSONLINE.COM/SPORTS/EQUESTRIAN/COACHES

TRAVEL

FROM COLUMBIA

I-77 NORTH TOWARD CHARLOTTE TO EXIT 27 (BLYTHEWOOD RD). TURN LEFT ON BLYTHEWOOD ROAD. GO ONE MILE AND TURN RIGHT ON SYRUP MILL RD. TRAVEL 0.8 MILES - ONE WOOD FARM IS ON THE LEFT.

FROM CHARLOTTE

I-77 SOUTH TOWARD COLUMBIA TO EXIT 27 (BLYTHEWOOD RD). TURN RIGHT ON BLYTHEWOOD RD. GO ONE MILE AND TURN RIGHT ON SYRUP MILL RD. TRAVEL 0.8 MILES - ONE WOOD FARM IS ON THE LEFT.

SLEEP

HOLIDAY INN EXPRESS (EXIT 27) - 120 CREECH RD, BLYTHEWOOD, SC 29016
COMFORT INN (EXIT 27) - 436 MCNULTY ST, BLYTHEWOOD, SC 29016
THERE ARE ALSO SEVERAL NEWER HOTELS AT I-77 EXIT 22 (KILLIAN RD)

EAT

FAST FOOD (EXIT 27)
MCDONALD'S, BOJANGLES, HARDEE'S, WENDY'S, KFC, PIZZA HUT, SUBWAY
RESTAURANTS (EXIT 27)
MCNULTY'S, GROUCHO'S, WAFFLE HOUSE, SAN JOSE (MEXICAN),
DOKO SMOKE BBQ, CAROLINA WINGS & RIBHOUSE
EXIT 22 - MULTIPLE OPTIONS
EXIT 23 - SCOTTIE'S GRILL



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MAY 6 - JUMPING SEAT ONLY

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RIDING INFORMATION PLEASE CHECK YOUR RIDING DISCIPLINE FOR CLINIC

JUMPING SEAT

3'

3'6"

HORSE RENTAL
\$600.00

**WE HAVE A LIMITED NUMBER OF and RENT HORSES ON A FIRST-COME, FIRST-SERVED BASIS.*

T-SHIRT SIZE

ADULT SMALL

ADULT MEDIUM

ADULT LARGE

ADULT XL

DESCRIBE SHOW EXPERIENCE

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CAMP SCHEDULE

MAY 5

5:00-6:00 PM : REGISTRATION AND FARM TOUR

MAY 6

FLAT

8:30-10:00 AM: GROUP 1

10:00-11:30 AM: GROUP 2

12:00-1:00 PM: COLLEGIATE RIDING DISCUSSION

FENCES

1:30-2:30 PM: GROUP 1

2:30-3:30 PM: GROUP 2

**LUNCH WILL BE PROVIDED*

CAMP LOCATION

ONE WOOD FARM

1201 SYRUP MILL ROAD, BLYTHEWOOD, SOUTH CAROLINA 29016

WHAT TO EXPECT?

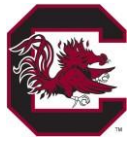
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Participant's Full Name*	Date of Birth*
Home Address*	
Phone Number*	Grade*
Camp Name*	Camp Dates*

In consideration of my Child, the Participant, being permitted to participate in the above Camp/Clinic, **I, and on behalf of my Child, agree and understand that:**

- My Child will abide by all the rules, guidelines, regulations and code of conduct of USC and/or host/site location requirements;
- My Child may be asked to leave the Camp/Clinic if I or my Child do not abide by the rules, regulations and code of conduct of USC and/or the host site location requirements;
- The instructor has sole authority to make decisions regarding my Child's continued participation if my Child's conduct or the circumstances warrant removal, dismissal, discipline or other action including the forfeiture of funds, deposits or fees without notice to me;
- My Child's participation in this Camp/Clinic is voluntary;
- I recognize that my Child's participation in the Camp/Clinic carries with it risks, including, but not limited to, injuries, illness, property losses, criminal acts and other damages, that cannot be eliminated regardless of the care taken;
- I have investigated the risks involved in this Camp/Clinic and I freely assume the risks and consent to my Child's participation;
- I further declare that my Child is fit and capable of participating in the Camp/Clinic
- I understand that by choosing my child to attend a camp/clinic at this time, they will have daily contact with student-athletes, coaches, and other Camp personnel and may be exposed to certain dangers and risks, including but not limited to all risks associated with contracting COVID-19. I understand that COVID-19 can be a serious illness requiring medical treatment, and may result in long-term or permanent injury, or death. I understand the currently known risks associated with contracting COVID-19 and understand that the Camp/Clinic cannot and does not guarantee that my child will not be exposed to COVID-19 during the camp. I therefore assume all dangers and risks inherent in the camp, including but not limited to exposure to COVID-19.

PHOTO RELEASE

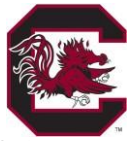
I give USC, its agents, employees, servants, assigns, and successors, without expectation of value, permission to:

1. Record my Child's likeness and appearance on video tape, audio tape, film, photograph or any other medium;
2. Use my Child's name, likeness, voice and biographical material in connection with these recordings; and
3. Exhibit, copy or distribute such recording in whole or in part without restrictions or limitation for any educational or promotional purpose or advertisement campaigns which the University of South Carolina, and those acting pursuant to its authority, deem appropriate.

PARENT PERMISSION FOR PARTICIPANT VEHICLE USE

My Child has permission to use his/her personal vehicle for the following travel purposes during the Camp/Clinic at the University of South Carolina and/or host site facility. The University does not provide automobile liability and/or comprehensive and collision coverage for personal vehicles. Your child will be permitted to use his/her vehicle for ONLY those purposes that you check below:

- Drive to and from camp
- Transport another participant in my Child's vehicle: (See below)
 - Please list the other participant(s) riding with your child: _____



I, furthermore agree that my Child may only be released to the following individual(s) during the USC Camp/Clinic.
 Parents/Guardians: Please include your names as well as any others authorized to whom to release your child. Please do not ask us to rely on a verbal permission. If your child is riding with another participant, please indicate the driver's name below.

Name*	Relationship*
Name	Relationship

My Child **MAY NOT** be released to the following individual(s)

Name	Other Information
Name	Other Information

Please attach court or legal documents as appropriate.

WAIVER AND RELEASE OF LIABILITY

Further, in consideration for my Child being permitted to participate in the Camp/Clinic, I, as the natural parent and/or as the legally authorized guardian, do hereby for myself, my family, heirs, personal representatives and assigns, agree not to sue, and I release, waive, discharge, hold harmless and indemnify, and forever defend the Camp/Clinic, State of South Carolina, the University of South Carolina, its members of the Board of Trustees, individually and collectively, its officers, employees, servants, agents and directors, Boo Major LLC from any and all liability, losses, claims, actions, suits, procedures, demands, rights, and causes of action of whatever nature, in law and equity, for any and all known or unknown, foreseen or unforeseen, bodily or personal injuries, death and permanent injury, illnesses, damage to property, or other losses, including those risks associated with contracting COVID-19, and consequences thereof, including expenses, costs, and attorney's fees, as may be sustained by my Child or me arising out of or in any way associated with my Child's participation in the Camp/Clinic.

Under **South Carolina law**, an **equine** activity sponsor or **equine** professional is not **liable** for an injury to or the death of a participant in an **equine** activity resulting from an inherent risk of **equine** activity, pursuant to Article 7, Chapter 9 of Title 47, Code of **Laws of South Carolina**, 1976.

I warrant I am the parent and or authorized legal guardian of the Participant and I warrant I am 18 years of age or older. I have carefully reviewed and I agree to the terms of this entire document.

Participant Signature*	Date*
Parent/Guardian Signature*	Date*
Witness Signature*	Witness Signature

Emergency Contact(s)

Name*	Relationship*
Primary Phone Number*	Secondary Phone Number