



"Where Lasting Friendships and Great Memories Are Made"

440 South Street Morristown, NJ 07960 Phone: (973) 644-3355
website: www.seatonhackney.com Email: seatonh@verizon.net

2025 Late Fall PEP Registration Form

Our 6-WEEK - 1hr Sessions Start on Saturday, November 8th

SATURDAYS OR SUNDAYS: ONE FORM PER RIDER, PLEASE!

Seaton Hackney Stables Petite Equestrian Program (PEP) is specifically geared to your young aspiring Equestrian, using size-appropriate ponies and cobs, patient and supportive instructor, all within a private setting and a fun-filled atmosphere. A great way to initiate their riding adventures!

Important: Please read before signing up!

After the first session of the program, fees are not refundable but the remaining sessions can be transferred to other activities with an administrative charge of \$25.

Make-up classes are not available for missed sessions

In case of inclement weather please call us to check the status of the session as some activities can be held in the main barn

PLEASE PRINT CLEARLY

Rider's Name: _____ Age: _____ Birthday: _____

Parent/Guardian Name: _____ Phone: _____

Emergency Contact Phone: _____ Email: _____

Address: _____ Town: _____ Zip: _____

Please check the session your child wishes to attend

9:30-10:30am
5-7yrs

11:00-12:00pm
3-4yrs

1:30-2:30pm
3-4yrs

3:00-4:00pm
5-7yrs

Saturday	<input type="checkbox"/>	\$445.00	<input type="checkbox"/>	11/8, 11/15, 11/22, 11/29, 12/6, 12/13	<input type="checkbox"/>	\$445.00	<input type="checkbox"/>
Sunday	<input type="checkbox"/>		<input type="checkbox"/>	11/9, 11/16, 11/23, 11/28, 12/7, 12/14	<input type="checkbox"/>		<input type="checkbox"/>

Registration Forms will not be accepted without accompanying payment (via cash, check, credit card payment)

OFFICE USE ONLY

Amount paid:

Cash

Check# _____

\$445.00

*CC Number: _____ Exp: _____ CVC: _____ Zip Code: _____

*3.25% Credit Card Processing Fee *Office will erase after charging.



DID YOU KNOW?

ONE MAY WONDER WHAT A PHD IN EDUCATION, A PSYCHOLOGIST AND A VETERINARIAN MAY HAVE IN COMMON? SIMPLE: THEY DESIGN, REVIEW, AND UPGRADE OUR PEP PROGRAM.

YOU SEE, WE BELIEVE THAT A CHILD'S DEVELOPMENT, EDUCATION, AND SOCIALIZATION ARE ESPECIALLY IMPORTANT DURING THEIR SOFT AGE. SO, WE WANT TO MAKE SURE THAT OUR TEAM IS TRAINED, AND OUR PROGRAM DEVISED BY KNOWLEDGEABLE, DEDICATED PEOPLE WHO EXCEL IN THEIR FIELDS AND ARE ABLE TO IMPART THEIR ENTHUSIASM, KNOWLEDGE AND KNOW-HOW TO OUR STAFF TO PASS ON TO YOUR CHILD IN A SUPPORTIVE AND FUN-FILLED ATMOSPHERE.



ENJOY WATCHING YOUR CHILDREN SHINE!



Waiver of Liability

THIS SECTION MUST BE SIGNED BY PARENT AND/OR GUARDIAN **BEFORE REGISTRATION IS ACCEPTED
EQUISHARE USA, LLC/ PONYSHARE / SEATON HACKNEY STABLES
LIABILITY WAIVER, RELEASE & HOLD HARMLESS AGREEMENT**

For Lessons, Pony Rides, Trail Rides, Camp and/or any activities offered by any of the above-named entities at/or away from the Seaton Hackney Stables, I acknowledge the risks involved in riding, interacting or being around, horses & animals.

I, THE UNDERSIGNED, EXPRESSELY AGREE TO WAIVE THE RIGHT TO PURSUE LEGAL ACTION FOR INJURIES OR LOSSES sustained by myself, child, or anyone in my party REGARDLESS OF WHO IS AT FAULT.

I / WE understand and agree to hold harmless and indemnify Marc J. Schumacher, the Stables, Equishare USA, LLC., Pony Share, Seaton Hackney Stables, the County of Morris, the Morris County Park Commission, as well as any Township or entity, School, Recreation Department or Committee involved in this activity, their employees, instructors, stable hands, independent contractors, position holders, clients, riders and visitors (collectively and individually referred to as "the Operators") and further release them from any liability or responsibility for accident, damages, injury, or illness to the undersigned and/or to any family member, friend, ward or spectator accompanying the undersigned on the premises of Seaton Hackney Stables at 440 South Street, Morris Township, NJ 07960 or at any location where the activity takes place as a result of my association with the above Operator(s). I/We understand and agree that I/we and/or my ward(s) and/or guest(s) may be kicked, struck, stepped on, bitten or may fall off. I also realize that the equipment, while regularly inspected may occasionally fail to operate properly (*for instance, as a result of the horse being startled and responding abruptly to an outside stimulus: An example of such occurrence could be a stirrup or a girth breaking or loosening or being dislodged as a result of a sudden equine reaction or un-proper positioning of the rider.*) I also understand that checking the above-mentioned equipment does not necessarily result in preventing its faulty operation or breakage. I acknowledge that the Stables or aforementioned entities require wearing protective headgear and that if I or my ward is riding without such it will be against the Operator's policy and as a result of my/their own decision and I will be deemed liable for any and all resulting injuries for not wearing such. Please note that parents may be asked to occasionally participate and help with their children.

Signature of Parent/Guardian: _____ **Print Name:** _____

Date: ____/____/____