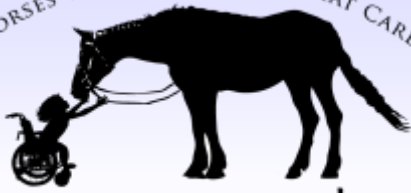


HORSES THAT HEAL HEARTS THAT CARE



THE RIGHT PATH

THERAPEUTIC EQUINE-ASSISTED PROGRAMS

at Quail Valley Ranch

16620 Old Shamrock Highway Drumright, OK 74030

Participant's Application & Health History

GENERAL INFORMATION (to be completed by caregiver or parent)

Participant: _____

DOB: _____ Age: _____ Height: _____ Weight: _____ Gender: M F

Address: _____

Ph. # Home _____ Work _____ Cell _____

* most reachable!!!

E-Mail _____

Employer/School: _____

Address: _____ Phone: _____

Parent/Legal Guardian/Caregivers: _____

Address (if different from above): _____ Phone: _____

Emergency Contact: _____ Phone: _____

Referral Source: _____ Phone: _____

How did you hear about the program? _____

HEALTH HISTORY

Diagnosis: _____ Date of Onset: _____

Please indicate current or past special needs in the following areas:

	Yes	No	Comments
Vision			
Hearing			
Sensation			
Communication			
Heart			
Breathing			
Digestion			
Elimination			
Circulation			
Emotional Mental Health			
Behavioral			
Pain			
Bone/Joint			
Muscular			
Thinking/Cognition			
Allergies			

MEDICATIONS (include prescription, over-the-counter; name, dose and frequency) _____

Describe your abilities/difficulties in the following areas (include assistance required or equipment needed):
PHYSICAL FUNCTION (i.e. mobility skills such as transfers, walking, wheelchair use, driving/riding)

PSYCHO/SOCIAL FUNCTION (i.e. work/school including grade completed, leisure interests, relationships family structure, support systems, companion animals, fears/concerns, etc.)

GOALS (i.e. why are you applying for participation? What would you like to accomplish?)

Signature: _____ Date: _____

LIABILITY RELEASE

_____ (Client's Name) would like to participate in the Right Path Riding Academy program. I acknowledge the risks and potential for risks of participating in the equine assisted activities that will be provided; however, I feel that the possible benefits for myself/my son/my daughter/my ward are greater than the risk assumed. I hereby, intending to be legally bound, for myself, my heirs and assigns, executors or administrators, waive and release forever all claims for damages against The Right Path Riding Academy, its Board of Directors, INSTRUCTORS, therapists, Aides, Volunteers and/or Employees for any and all injuries and/or losses I/my son/my daughter/my ward may sustain while participating in classes at the Right Path Riding Academy.

Date: _____ Signature: _____

Client, Parent or Legal Guardian

PHOTO RELEASE

I DO
 DO NOT

consent to and authorize the use and reproduction by The Right Path Riding Academy & PATH Int'l of any and all photographs and any other audio/visual materials taken of me for promotional material, educational activities, exhibitions or for any other use for the benefit of the program.

Signature: _____ Date: _____

Client, Parent or Legal Guardian

This document will remain in effect until otherwise notified in writing.

The Right Path Conduct Policy

The Right Path Riding Academy is a Christian organization which seeks to help special needs children and adults achieve their highest potential through the unique avenue of an equestrian environment. In order to achieve our mission, we require that all therapeutic participants, paid and volunteer personnel, and guests abide by our conduct policy. This will ensure an enjoyable experience for everyone.

It is expected that everyone participating at The Right Path Riding Academy, to the best of their ability, will maintain regular and punctual attendance, courteous interactions with others, quiet and orderly conduct, conscientious attention to duty, and performance that reflects support for our mission.

Prohibited Activities

When on The Right Path Riding Academy grounds, the following activities are prohibited:

- Violations of existing Right Path privacy, safety, attendance, cancellation, and other policies.
- Violations of federal, state, and local laws/ordinances.
- Possessing, using, or being under the influence of alcohol and/or other illicit and illegal drugs. Drugs mandated as part of the treatment of a current medical condition are exempted.
- Mistreatment of animals.
- Inappropriate and/or abusive behavior towards others.
- Insubordination in regards to The Right Path instructors or supervisory personnel in connection with their official duties.

Unlawful Harassment

Our academy prohibits harassment because of color, race, gender, age, religion, national origin, disability, or any other basis protected by law. Prohibited harassment behaviors include:

- Verbal threats, epithets, derogatory comments, or slurs.
- Derogatory posters, photographs, cartoons, drawings, or gestures.
- Assault, unwanted touching, or blocking normal movements.
- Retaliation for reporting, or threatening to report, harassment.

Dress Code

Professional dress required for activities at the barn.

- closed toe shoes required in the arena/pastures
- no dangling jewelry
- any shorts should be of moderate length
- Please be respectful of others when dressing. Modesty is kindness to others. Keep private body parts private.

Penalties

Any prohibited activity may become grounds for disciplinary action up to and including dismissal. If necessary and appropriate, a report will be made to law enforcement personnel.

Confidentiality Statement

General Principles

The Right Path Riding Academy shall preserve the right of confidentiality for all individuals in its program. To ensure this, we have created a Privacy and Confidentiality Policy.

Information Covered

In fulfilling its mission, the Right Path Riding Academy collects and records information from students, parents, volunteers, foundations, and third parties. We recognize that it is our fiduciary duty to do what it takes to ensure that the information entrusted to us is available only to those with a need to know. Our confidential information is never released without the expressed written consent of the information owner. We take any violation of our privacy policy seriously, and the Right Path Riding Academy reserves the right to sever any relationship with an entity that violates this policy.

It is our policy to collect only the information necessary to fulfill our mission. The information that we collect in the process of our mission will not be given away or sold to third parties for marketing purposes. We do not disclose nonpublic personal information about staff, volunteers, business partners, or students except as required by law. We adhere to industry standard best practices for protecting our data, and those involved with the Right Path Riding Academy have been instructed on our privacy policy and their responsibilities in adhering to it.

Persons Subject to This Policy

Anyone who works or volunteers for, or provides services to our riding academy is bound by this policy. This includes but is not limited to staff members, independent contractors, temporary employees, volunteers, and board members. It also applies to anyone connected with the center who could contain this information either accidentally or on purpose.

I have read and agree to abide by The Right Path Conduct Policy and Confidentiality Statement.

Signature

Date

This document will remain in effect until otherwise notified in writing.

PARENT/CAREGIVER LIABILITY RELEASE

_____ (Client's Name) would like to participate in activities at The Right Path Riding Academy and Quail Valley Ranch. I acknowledge the risks and potential for risks of participating in the equine assisted activities that will be provided; however, I feel that the possible benefits for myself/my son/my daughter/my ward are greater than the risk assumed. I hereby, intending to be legally bound, for myself, my heirs and assigns, executors or administrators, waive and release forever all claims for damages against The Right Path Riding Academy, its Board of Directors, INSTRUCTORS, therapists, Aides, Volunteers and/or Employees for any and all injuries and/or losses I/my son/my daughter/my ward may sustain while participating in classes at the Right Path Riding Academy.

Date: _____ Signature: _____

Signature of volunteer/visitor

This document will remain in effect until otherwise notified in writing.