



Heartland Equine Therapeutic Riding Academy

Where horses and you make dreams come true!

Dear Parents, Participants or Caregivers,

Thank you for choosing HETRA. We look forward to working with you this year! Please read through all the information in this letter thoroughly. It contains very important information regarding registration of your student and participation in the HETRA program.

We currently have openings in the Hippotherapy, Therapeutic Riding, Public Riding & Driving program, but these spots fill up fast so get your paperwork in quickly!

We are very excited about everything we have accomplished in the last few years! In order to keep the program affordable to all of the participants, HETRA raised \$2,000.00 per student over and above what parents paid in student fees. That's a lot of grant writing, fundraising events, and requests for private donations. Unlike other businesses we do not just pass the extra cost on to those we serve. However, in order to continue to provide the program at this reduced cost, we need your help. We have multiple fundraisers throughout the year that we need assistance with. These events are all posted on the events page of our web site at www.HETRA.org. If you would be willing to help us with any of these fundraisers please contact me at Edye@hetra.org or (402) 708-6433.

We are very proud of our dedicated and motivated parents and all that you do for the HETRA organization. You are a very important part of our Team!!!! We are looking forward to embarking on an adventure with you.

Thank You!

Edye Godden

Edye Godden, OTR/L
HETRA Executive Director
Edye@HETRA.org
(402) 708-6433
WWW.HETRA.ORG

Heartland Equine Therapeutic Riding Academy

STUDENT HANDBOOK

1. **GETTING STARTED:** First please complete all paperwork included in this package. Then either mail (HETRA, PO Box 260, Valley, NE 68064) or fax ((866) 577-4598) your completed paperwork in to HETRA. Any individual with a disability must complete the precautions and contraindications form and the physician's statement and medical history form. Once you have completed your paperwork please contact Edye (402) 708-6433, to schedule your evaluation (new students) or riding time (returning students). If you are a returning student your evaluation will be completed during your first riding session. All **new students** need to schedule a separate evaluation. **There will be a \$25.00 registration fee for all students which is due when you send in your paperwork.**
2. **ELIGIBILITY REQUIREMENTS:**
 - Must be at least 2 years old for Hippotherapy, 4 years old for Therapeutic Riding, 5 years old for Public Riding and 8 years old for Carriage Driving
 - At or under the weight limitations (see #4)
 - No contraindications as per the precautions and contraindications form.
2. **PROGRAMS:** HETRA offers Therapeutic Riding, Therapeutic Driving, Hippotherapy and Public Riding Programs at both our Omaha and Valley facilities. There is a description of each program below. At the time of your student evaluation one of our therapists will discuss each program with you and make a recommendation as to which program is most appropriate for the student. Riding time: Each student's session will last for 30 minutes. This includes mounting and dismounting times for the student. We allow approximately 5 minutes for mount and dismount so this gives each rider approximately 25 minutes on the horse. It is up to the instructors' discretion to decrease the time of a session for any reason including the following: student fatiguing, student medical problems, student complaining of discomfort, student behavior problems, horse fatiguing or other horse related problems. If a horse problem occurs we will attempt to complete your session time if possible on another horse. Instructors will evaluate each individual student's needs and continue the session if possible. ****** We would highly encourage all parents to attend a volunteer training. Because our program relies heavily on volunteers there is always the chance that we may have volunteer no-shows or cancellations.** It is very helpful to the HETRA staff to know that we have trained parents able to step in for absent volunteers, this will also enable your student to continue with their mounted session as planned. Volunteer training dates are posted on our web site at www.hetra.org. If there are not enough volunteers to conduct a safe riding lesson a ground/grooming lesson may be offered in place of the riding session.

Therapeutic Riding Program: Therapeutic Riding students are scheduled to ride once a week for 30 minutes. Therapeutic Riding students must be at least 4 years old. **Students are eligible to ride more than once a week if there are available time slots.** All therapeutic riding students are instructed or supervised by NARHA certified riding instructors. These are typically group sessions with one instructor teaching 2 to 3 riders. Goals for this program focus on horsemanship skills and leisure activities. Students are screened by a therapist and their programs are periodically reviewed by the therapist for changes.

Hippotherapy: Students participating in this program will participate 1-3 times per week with the time frame and number of times per week being recommended by the therapist, physician and family. Hippotherapy students must be at least 2 years old. A licensed OT, PT, PTA, or COTA will conduct all sessions. All therapists are either NARHA certified or are supervised by a NARHA certified Instructor. Goals for this program focus on functional ability. This program is basically an outpatient OT or PT session with the horse being utilized as one of the treatment tools within this session.

Driving Program: Students will participate one time per week for 30 to 45 minutes. Student must be at least 8 years of age. These will be individual sessions instructed by a NARHA certified driving instructor. Students are screened by an OT and programs are periodically reviewed by the OT.

Public Riding: HETRA has opened up our center to individuals in the public that would like to come take riding lessons. The rider must be at least 5 years old. All lessons are 30 minutes and these are typically group sessions with one NARHA certified instructor teaching 2 to 3 students. Goals for this program focus on horsemanship skills and leisure activities.

3. STUDENT ACCEPTANCE, DISMISSAL AND DISCHARGE POLICY

It is at the discretion of HETRA's Executive Director and Program Director to accept or remove a student from the program. The results of a risk/benefit analysis will also be considered. Students who do not adhere to the rules and procedures or meet the guidelines for eligibility are subject to dismissal or discharge. Possible grounds for dismissal

may include, but are not limited to: conduct endangering another student or staff or the horse, conduct endangering themselves, consistent failure to follow safety procedures with respect to the horses, a gain in weight above the HETRA maximum levels, failure to cancel in advance for more than three lessons, incomplete paperwork, (Paperwork that is required is: Registration / Health History/Photo Release, Authorization for Emergency/ Medical Treatment, Consent for Release of Information, Participant's (Signed) Medical History and Physicians Statement, Policies, Procedures and Barn Rules Agreement), the development of a contraindicated condition or the deterioration of a condition to the point horseback riding is no longer beneficial or could be harmful to the participant, or where safety for the rider or others has become a concern.

Riders at HETRA shall have no history of inappropriate behavior with fire or any tendencies or history of abuse or violence directed toward other people or animals. HETRA reserves the right to deny services to any individual based upon concerns for the applicant's safety and/or the safety of the horses, volunteers, staff, property owners, or for other reasons in accordance with NARHA operating center guidelines.

No student will be dismissed without an opportunity to discuss the reasons with supervisory staff. The student may at any time, for whatever reason, decide to sever the student relationship with HETRA. Notice of such a decision should be communicated as soon as possible.

4. WEIGHT LIMITATIONS for All Riders

Maximum weights are listed below, but decisions regarding participation will be based on the availability of a suitable horse related to the height, weight, cognition and balance of the participant.

- 220 lbs. for a well balanced centered rider not requiring sidewalkers.
- 180 lbs. for an unbalanced rider needing sidewalker assistance.
- Each horse has individual weight limitations based upon the horses height, weight, age and physical and medical condition.

5. SCHEDULING of a weekly riding time for new students: Once the initial evaluation is completed we will make a program recommendation for your student and then see if we have a current opening in the HETRA schedule that is suitable to meet your students needs. If an opening does not currently exist then we will put your student on a waiting list and you will be notified as soon as an opening becomes available. Riding sessions are typically offered late afternoon to evening on weekdays and mid day on the weekends, available riding times will be discussed at your evaluation.

6. BILLING:

- **Therapeutic Riding Program & Therapeutic Driving Program** is \$25 per ride/drive and will be billed in 8 week courses (\$200) prior to the beginning of the course. If your payment is postmarked by the due date (due date is the last day of the previous session or 15 days from when the invoice is mailed) on your invoice we will offer you a \$20 discount (total cost of 8 week session with discount = \$180).
- **Hippotherapy** All hippotherapy sessions will be billed on a weekly basis and is due by the due date posted on your bill. Hippotherapy is billed at \$25 per 15 minute interval according to the CPT code designated by the therapist. All hippotherapy sessions are billed as self pay as HETRA does not bill insurance companies.
- **Public Riding Program** is \$25/ride and will be billed in 8 week courses (\$200) prior to the beginning of the course. The same discount applies of \$20 if the invoice is paid by the due date.

Any rider (in any program) with an outstanding balance from the previous course will not be allowed to ride until the balance on the account has been paid or payment arrangements have been made. In addition, all student fees that are not paid according to the previous payment arrangements, will be assessed a minimum of \$5.00 charge per month to cover administrative expenses on the balance.

7. CANCELLATIONS:

If HETRA should cancel a riding session (due to weather or instructor illness, etc.):

- **Therapeutic riding, Carriage Driving & Public Riding** students your fees will be credited toward the next 8 week course.
- **Hippotherapy** students you will not be billed for HETRA cancellations.

All weather cancellations will be posted on our barn line (402) 359-8830, please check this number 1 hour before you are scheduled to ride. You will **not** be notified in any other way for weather cancellations. There will be a notice on the answering machine stating we are cancelled for that day, if it is the regular HETRA message then sessions are still on. If HETRA cancels for any other reason you will be notified by a HETRA representative.

If you cancel a riding session: **Therapeutic riding, Therapeutic Driving & Public Riding** students this session will not be refunded, but can be made up. You are allowed a maximum of 2 make up sessions per 8 week course and these must be made up during that course or the course immediately following the cancelled sessions.

Hippotherapy students will not be billed for this session for cancelled sessions.

HETRA running late: Any time the HETRA program is running late (as we will at times) we will do our best to get back on schedule however, we will offer the students their full session time. We will attempt to notify you upon arrival regarding the length of wait before your student will ride.

Student tardiness: Any time a rider is late their session time will be decreased accordingly in order for the schedule to remain intact. **If a rider is 15 or more minutes late for a session they will NOT be allowed to ride for that session.** We will do our best to provide other activities for the student to participate in while at the barn such as grooming.

8. **MAKE-UP'S: Therapeutic Riding, Therapeutic Driving & Public Riding:** Instructors will offer make up sessions on the first Saturday of every month (Please contact Edye 708-6433 to schedule a make up). Only student cancelled sessions are eligible to be made up. If a rider is a no-show (no previous notice given), this session will not be eligible to be made up. **Hippotherapy:** Please contact Edye to schedule make up sessions – these sessions will also be offered on the first Saturday of the month. Email notifications is sent out the week of make up sessions and times are offered on a first come first serve basis.
9. **SCHOLARSHIPS:** HETRA offers partial scholarships to all those who need them. Scholarship levels will be approved according to the federal poverty guidelines. **If you do not qualify for a discount based on the guidelines but still need assistance please contact Edye Godden, we will be happy to work with you.** We also require that all parents/families that participate in the scholarship program assist during the year with 1-2 fundraising activities that help keep the program affordable to all of our students, and provide a minimum of 4 volunteer hours per 8 week session. We will provide a discount form at your request during the initial evaluation along with a list of volunteer activities for your review (these will include activities that can be completed at the barn or at home). HETRA has also instituted a discounted services plan for those that help to raise funds for HETRA or those that volunteer for HETRA. We do have a list of other community resources that may assist with the cost of the program for your students. We do ask that you follow up with these resources if you are in need of discounted services or a scholarship first and if you are denied at this level then we will assist you through the HETRA scholarship program.
10. **ATTIRE:** No open toe shoes, sandals or clog type shoes. No slick (jogging type) pants. And we would prefer that your student wore pants instead of shorts as the saddle can get very uncomfortable with direct skin contact.
11. **PARKING:** Parking spaces directly in front of the barn entrances are reserved for the HETRA students & parents.
12. **CHILDREN:** We ask that children be monitored and in direct vision of the adult at all times while at the facility. Please review the barn rules with your children prior to arriving at the barn.
13. **DOGS and OTHER ANIMALS:** Do not bring dogs or other animals to the barn with you at anytime. The exception to this rule is service animals. Please let your instructor know if you will be bringing a service animal to the session with you.
14. **VOLUNTEER & GUEST DISMISSAL POLICY-** HETRA reserves the right to dismiss a guest or volunteer from the facility and from the program if their behavior is putting themselves, a student, staff, or other volunteers or the horse's mental or physical health in jeopardy. The HETRA instructor in charge at the time of the incident will review the behavior with the volunteer and determine the level of intervention necessary. The level of intervention could include a verbal or written warning or immediate dismissal from the HETRA facility and program. Physical, emotional, mental or sexual abuse by a person at the HETRA facility will not be tolerated and will result in immediate dismissal from the HETRA facility. Alcohol consumption by a volunteer prior to a session is not allowed. A volunteer smelling of alcohol will not be allowed to assist with that night's session.
15. **QUESTIONS:** Please direct questions to your student's instructor. If you do not get a satisfactory answer to your question please feel free to contact Edye at 708-6433.

Thanks so much for your interest in our program, we look forward to working with you this year. I can be reached and communicate best through email at edye@hetra.org. I can also be reached at 708-6433.

Thank You!

Edye Godden

Edye Godden, OTR/L

Executive Director, HETRA

Heartland Equine Therapeutic Riding Academy

PRECAUTIONS & CONTRAINDICATIONS FORM

Dear _____,

Your patient, _____ is interested in participating or continued participation in supervised equine activities at our facility. In order to safely provide this service, our center requests that you complete/update the attached Medical History and Physician's Statement Form. Please note that the following conditions, if present may represent precautions or contraindications to equine activities. Therefore when completing this form, please circle any conditions that are present, and explain below to what degree.

ORTHOPEDIC

- Spinal Joint Fusion/Fixation
Spinal Joint Instabilities/Abnormalities
Atlantoaxial Instabilities (including neurological symptoms)
Heterotopic Ossification/Myositis Ossificans
Joint Subluxation and Dislocation
Osteoporosis
Pathologic Fractures
Coxa Arthrosis
Cranial Deficits

Four horizontal lines for notes under Orthopedic section.

NEUROLOGIC

- Hydrocephalus/shunt
Spina Bifida
Chiari II Malformation
Hydromyelia
Seizure Disorders
Tethered Cord

Four horizontal lines for notes under Neurologic section.

None of the above conditions are present

Physician

Signature _____ Date _____

MEDICAL/PSYCHOLOGICAL

- Allergies
Animal Abuse
Cardiac Condition
Physical/Sexual/Emotional Abuse
Blood Pressure Control
Dangerous to self or others
Exacerbations of medical conditions (ie RA, MS)
Hemophilia
Fire Settings
Medical Instability
Migraines
PVD
Respiratory Compromise
Recent Surgeries
Substance Abuse
Thought Control Disorders
Weight Control Disorders

Four horizontal lines for notes under Medical/Psychological section.

OTHER

- Indwelling Catheter/Medical Equipment
Age under 4 years
Medications - ie photosensitivity
Poor Endurance
Skin Breakdown

Four horizontal lines for notes under Other section.

Thank you very much for your assistance. If you have any questions or concerns regarding this patient's participation in equine assisted activities, please feel free to contact me at 708-6433.

Sincerely

Edye Godden

Edye Godden, OTR/L
HETRA Executive Director

Heartland Equine Therapeutic Riding Academy
RIDER'S MEDICAL HISTORY AND PHYSICIAN'S STATEMENT

Name _____ Date of Birth _____ Height _____ Weight _____

Address _____ Name of Parent/Guardian _____

Diagnosis _____ Date of Onset _____

Past/Future Surgeries _____ Medications: _____

***For Persons with Down Syndrome: Negative Cervical X-ray for atlantoaxial instability- X-ray date _____
 Negative for clinical symptoms of atlantoaxial instability

Seizure Type _____ Controlled Yes No Date of last seizure _____

Shunt Present: Yes No Date of Last Revision: _____

Tetanus Shot Yes No Date of last Tetanus _____

Please indicate current or past special needs in the following areas by checking yes or no. If yes, please comment.

AREAS	Yes	No	Comments
Auditory (hearing)	_____	_____	_____
Visual	_____	_____	_____
Speech (communication)	_____	_____	_____
Cardiac	_____	_____	_____
Circulatory	_____	_____	_____
Pulmonary	_____	_____	_____
Neurological	_____	_____	_____
Muscular	_____	_____	_____
Orthopedic (Bone/Joint)	_____	_____	_____
Allergies (including medication)	_____	_____	_____
Thinking/Cognitive	_____	_____	_____
Emotional/Mental Health	_____	_____	_____
Behavioral	_____	_____	_____
Digestion	_____	_____	_____
Elimination	_____	_____	_____
Pain	_____	_____	_____
Sensation	_____	_____	_____

Mobility Independent Ambulation _____ Crutches _____ Braces _____ Wheelchair _____ Walker _____

Please indicate any special precautions/additional information _____

In my opinion, this person can participate in supervised equestrian activities. However, I understand that the therapeutic riding center will weigh the medical information above against the existing precautions and contraindications. I concur with a review/screening of the person's abilities/limitations by a licensed/credentialed health professional (PT, OT, or Speech) in the implementing of an effective equestrian program.

Physician Name (please print) _____ Phone _____

Physician Signature _____ Date _____

Address _____ City _____ State _____ Zip _____

Heartland Equine Therapeutic Riding Academy
RIDER'S REGISTRATION & EMERGENCY CONTACT INFORMATION

Student _____ Date of Birth _____ Age _____ Gender: M F

Address _____ City _____ State _____

Zip Code _____ County _____ Student's School or Employer: _____

Ethnicity (optional, this information is often asked for when applying for grants) _____

Allergies: _____ Current Medications: _____

Student Diagnosis _____

Mother's Information:

Name _____ Mailing Address _____

City _____ State _____ Zip _____ Email _____

Cell Phone _____ Home Phone _____ Work Phone _____

Place of Employment _____ Occupation _____

Father's Information:

Name _____ Mailing Address _____

City _____ State _____ Zip _____ Email _____

Cell Phone _____ Home Phone _____ Work Phone _____

Place of Employment _____ Occupation _____

Individual Responsible for payment: Father Mother Other (if other is circled fill out billing information)

Individual Responsible for Payment (Name) _____

Mailing Address _____ City _____ State _____ Zip _____

Cell Phone _____ Home Phone _____ Work Phone _____

Relationship to student: _____ Email _____

Caregiver Name (if applicable): _____ **Phone Number:** _____

Referral Source: _____

In the event emergency medical aid/treatment is required due to illness or injury during the process of receiving services, or while being on the property of the agency, I authorize Heartland Equine Therapeutic Riding Academy to:

1. Secure and retain medical treatment and transportation if needed.
2. Release student records upon request to the authorized individual or agency involved in the medical emergency treatment.

In the event I cannot be reached please contact:

Emergency contact _____ Relation: _____ Phone _____

Emergency contact _____ Relation: _____ Phone _____

Physician's Name _____ Phone _____

Preferred Medical Facility _____

Health Insurance Company _____ Policy # _____

Heartland Equine Therapeutic Riding Academy

Rider's Liability Release, Photo Release & Medical Consent Plan

Liability Release

_____ (student's name) would like to participate in the Heartland Equine Therapeutic Riding Academy program. I acknowledge the risks and potential for risks of horseback riding. However, I feel that the possible benefits to 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 Heartland Equine Therapeutic Riding Academy, its Board of Directors, Instructors, Therapists, Aides, Volunteers, and Employees for any or all injuries and/or losses I/my son/my daughter/my ward may sustain while participating in Heartland Equine Therapeutic Riding Academy Programs.

Date: _____ Signature _____
(Student, Parent or Guardian)

Photo Release

I hereby consent to and authorize the use and reproduction by Heartland Equine Therapeutic Riding Academy of any or all photographs and any other audiovisual materials taken of me/my son/my daughter/my ward for promotional printed material, educational activities or any other use for the benefit of the program.

Date: _____ Signature _____
(Student, Parent or Guardian)

Please fill out either the consent or non-consent plan

Medical Consent Plan

This authorization includes x-ray, surgery, hospitalization, medication and any treatment procedure deemed "life saving" by the physician. This provision will only be invoked if the parent/guardian or emergency contact is unable to be reached.

Date _____ Consent Signature _____
(Student, Parent or Guardian)

Parent/Guardian Name _____ Address _____

Home Phone _____ Work Phone _____ Cell Phone _____

Medical Non-Consent Plan

I do not give my consent for emergency medical treatment/aid in the case of illness or injury during the process of receiving services or while being on the property of the agency. The participant's parent or guardian MUST remain on site at all times during equine assisted activities. In the event emergency treatment/aid is required, I wish the following procedures to take place:

Date _____ Non-Consent Signature _____
(Student, Parent or Guardian)

Parent/Guardian Name _____ Address _____

Phone _____

SAFETY RULES FOR ALL HETRA STAFF, VOLUNTEERS, FAMILIES AND STUDENTS

1. Please **DO NOT** pet the horses in any outside pens or indoor stalls. Some horses on the property are privately owned and are not part of the HETRA herd.
2. Please do not arrive at the barn before you are scheduled, there must be a HETRA instructor, Staff Member, or Barn Leader on site when volunteers, students or guests arrive. If one of these individuals is not on site when you arrive please wait in your vehicle until they arrive. For insurance purposes we also cannot have visitors at the HETRA facilities when there is not a staff member on site.
3. Do Not enter a stall or outside pen unless asked to do so by a HETRA staff member or Barn Leader.
4. **ONLY** the barn leader or certified horse leaders will be allowed to get horses from the outside pens and lead horses in the arena.
5. You should not be back in the stall area of the barn or in the outside pens **UNLESS** you have been asked by an instructor or barn leader to complete a specific task in this area - once this has been completed please return to the waiting area in front of the arena.
6. **NEVER** sit, kneel or lay on the ground near a horse.
7. We ask that you do not take cell phones into the arena with you, and all phones are turned to silent or vibrate when in the barn.
8. Please only use HETRA tack and equipment and always return tack, equipment, etc to its appropriate place.
9. Always clean up after yourself and any horse you are working with (sweep up any hair, manure, and throw away any trash).
10. All riders during a HETRA riding session are required to wear approved safety helmets (this includes instructors).
11. Please do not feed any horses any treats. Treating the horses tends to promote biting, also some of the horses are on special diets, and treats can be detrimental to their health. Please do not allow the horses to lick your hands this encourages biting. Please do **NOT** pet the horses on their heads or faces - this is a very personal area for the horses and can make them crabby.
12. When approaching a horse always consider the horse's limited field of vision. Horses cannot see directly behind or in front of them without moving their head. Always approach a horse at the shoulder, speak to the horse as you approach and then extend your hand and pat them on the neck or shoulder. When moving around the horse, place a hand on their hip as you slowly move around them allows them to know where you are.
13. Avoid sudden movements when around the horse. This includes removing coats, raising arms suddenly, running, jumping climbing, etc. Horses can spook easily, please keep this in mind at all times when around the horses.
14. Please **Do NOT** reach into or pet a horse if the stall front on the horse's stall is up. This is an indicator that the horse may **BITE** or they are in time out.
15. Please do not bring any dogs or other animals to the barn area. (If you have a service animal please notify a HETRA staff member)
16. The cats are cute and fun to play with but remember they can bite and scratch. Playing with the cats is done at your own risk. Please monitor any children during their interaction with the cats.
17. All children and volunteers under the age of 12 must be **DIRECTLY** monitored by an adult at all times while on the property.
18. **DO NOT** enter any other buildings on the property except for the bathroom building (Valley).
19. If you are not directly involved with a session please keep all activities and conversations to the designated waiting areas or check with the barn leader or schedule keeper as to additional tasks that need to be done around the barn. It is important to keep noise and conversation to a minimum when lessons are being conducted as it can be very distracting for the students and horses.
20. The session instructor is ultimately responsible for all aspects of the session from the time the first horse is taken out of the stall until the last one is put away. Please listen and follow all directions given by the session instructor, and follow all safety rules outlined during your time at the barn. Please also be aware of all situations around you and report any unsafe situation to the session instructor or barn leader immediately.
21. **HETRA Volunteer & Guest Dismissal Policy:** HETRA reserves the right to dismiss a guest or volunteer from the facility and from the program if their behavior is putting themselves, a student, staff, other volunteers or the horse's mental or physical health in jeopardy. The HETRA instructor in charge at the time of the incident will review the behavior with the volunteer and determine the level of intervention necessary. The level of intervention could include a verbal or written warning or immediate dismissal from the HETRA facility and program. Physical, emotional, mental or sexual abuse by a person at the HETRA facility will not be tolerated and will result in immediate dismissal from the HETRA facility. Alcohol consumption by a volunteer prior to a session is not allowed. A volunteer smelling of alcohol will not be allowed to assist with that night's session.

These rules are in place for everyone's safety. Please follow these rules at all times while at the facility. Anyone not following these rules will be asked to leave the facility.

My Family and/or I have read the barn rules and agree to follow them at all times while at the facility.

Signature _____ Date _____

(Parent or Guardian for _____ family)