



Barn Yard Equine

www.barnyardequine.com

All participants including those waiting/observing the program will:

1. Walk on the barn premises.
2. Not smoke on the premises, unless in designated area.
3. Use appropriate voices and avoid sudden movements near horses.
4. Not approach a horse without being accompanied by a Barn Yard crew member.
5. Not chew gum or eat candy while participating in equine activities.
6. Wear appropriate clothes and shoes; close toed shoes, pants, avoid loose or floppy items.
7. Prior to session, inform therapist or instructor of any changes or limitations in their physical capabilities or pertinent medical conditions, such as medicine changes.
8. Prior to session, inform therapist or instructor of any experiences that would affect ability to perform related to behavior, safety, or functioning conditions.
9. Inform therapist or instructor of any schedule changes or conflicts that would affect treatment as soon as possible.
10. Parents or guardians will closely supervise their children or visitor's while waiting in the designated waiting areas. Only Barn Yard crew and the participant(s) are allowed in treatment areas.
11. The main residence, boarder stalls, pasture and any areas labeled Equine Connections are off limits.
12. Understand that if the safety of the Barn Yard crew, participant(s) or animals is compromised due to not following the rules, hitting, kicking, hair pulling or any other adverse behaviors that compromise the safety of our humans or herd, services may be immediately discontinued on Barn Yard Equine premises.
13. Understand that I am being videotaped while on the premises.

Confidentiality statement: Barn Yard Equine maintains the confidentiality of information collected during the referral and treatment process. All information is considered confidential and everyone involved must adhere to HIPAA Guidelines regarding PHI/PII. Activities involve sharing extremely sensitive and personal information between all involved with the provision of services. Information collected is used to develop a safe, individualized program to best benefit our patient in a therapeutic equine activities setting. During discussions related to individual participants for the purpose of review and evaluation, strict safeguards or confidentiality are maintained. Personally identifiable information will not be disclosed publicly without express prior consent of the participant or participant's parent or guardian.

Clients Receiving Therapy Services on Barn Yard Premises:

I will be billed a horse leasing fee by Barn Yard Equine concurrent with each therapy session. This fee is not covered by insurance and is the parent responsibility unless previous arrangements have been made. I understand that each therapy session is billed by a separate agency.

I understand and agree to adhere to the basic rules outlined above.

Signature _____ Date _____

Participant's name(s) _____