

Horse Camp at Saddle Up

Registration Form 2019

My child is registering for the week of:

June 3 – 7 June 17 – 21

June 10 - 14 June 24 – 28

9AM-1PM

First Name _____ Middle Initial _____

Last Name _____

Boy

Girl Home Address _____

City _____ St _____ Zip _____

E-mail Address _____

Home Phone _____ Cell Phone _____

Birth Date _____ Grade _____ Age ____

Information on who the camper resides with:

Mother's/Female's First and Last Name

Relationship to camper: Mother Grandmother Stepmother

Legal Guardian

Father's/Male's First and Last Name

Relationship to camper: Father Grandfather Stepfather

Legal Guardian

Phone number where parent or guardian can be reached in case of emergency

Name of Alternate emergency contact

Phone Number _____ relationship to camper _____

Campers will partner with a fellow camper since 2 campers will be assigned to one horse. Your child can request a preferred partner if they have one.

Name of Preferred Partner _____

Shirt Size: Youth SM____ M____ L____ XL____

Adult SM____ M____ L____ XL____