

HOWDY HOOVES HORSE CAMP

REGISTRATION FORM

My child is registering for the week of:

June 13-16, 9AM-12PM June 20-23, 9AM-12PM June 27-30, 5:30PM-8:30PM

CAMPER INFORMATION

Camper's Name: First _____ MI _____ Last _____

Boy Girl

Home Address _____

City _____ State _____ Zip _____

E-mail Address _____

Home Phone _____ Cell Phone _____

Birth Date _____ Grade _____ Age _____

INFORMATION ON WHO THE CAMPER RESIDES WITH:

Mother's/Female's First & Last Name _____

Relationship to camper: Mother Grandmother Stepmother Legal Guardian

Father's/Male's First & Last Name _____

Relationship to camper: Father Grandfather Stepfather Legal Guardian

EMERGENCY CONTACTS

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

Name of Alternate Emergency Contact _____

Phone Number _____ Relationship to Camper _____

CAMP PARTNER REQUEST

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 _____

CAMPER SHIRT SIZE

Shirt Size: Youth SM M L XL

Adult SM M L XL

How did you hear about Howdy Hooves?

Internet Facebook Local School Friend Other _____