



Summer Camp Registration Form

Camper's Name: _____

Address: _____

Telephone number: _____

Emergency Contact: _____

AGE: _____ Riding Level: (circle one)

Beginner

Intermediate

Advanced

Please sign my child up for the following week(s) for your 4-day camps from 10am to 4pm.
Priced at \$275.00.

_____ June 13-16, 2017

_____ July 11-14, 2017

_____ August 1-14, 2017

A non-refundable deposit of \$150 must accompany this form to secure your child's place. The total balance due will be due by the first day of camp or the week prior to camp.

Parent/Guardian Signature: _____

Chestnut Lane Stables

1524 Clarence Secrest Road, Monroe, NC 28110

Phone: 704-225-8522 Email: Chestnutlane.nc@gmail.com