



**EQUESTRIAN SUMMER CAMP
REGISTRATION FORM**

To reserve your camp dates, complete this form and return it along with your deposit of \$100. The remainder of the fee is due on the first day of the camp.

Name of camper: _____

Address: _____

City: _____ State: _____ ZIP: _____

Father's name: _____

Work/Home phone # _____ Cell # _____

Mother's name _____

Work/Home phone # _____ Cell # _____

Contact in case of emergency: _____

Phone # _____ Cell # _____

Medical concerns: _____

Allergies: _____

Health Insurance information _____

-Please select the week you would like to attend:

[] June 8th - 13th, 2020 - **\$550** - from 9:00 - 2:00 ~ **Show Camp~**

[] June 15th - 19th, 2020 - **\$350** - from 9:00 - 2:00

[] June 22nd - 26th, 2020 - **\$350** - from 9:00 - 2:00

425 Faye Street - Apopka - Florida. 32712

Phone: (407) 402 6454



June 29th - 3rd, 2020 - **\$350** - from 9:00 - 2:00

July 20th - 24th, 2020 - **\$350** - from 9:00 - 2:00

-Bringing a horse to camp with you?

Yes - additional boarding cost of \$100 for 5 day camp

No

Day campers arrive each day at 9:00am and leave at 2:00pm. Before and aftercare is available with prior arrangements for an additional charge of \$10.00 per hour exceeding the camp time. Our strong emphasis on safety requires that all students wear boots and ASTM approved helmets. Campers should also complete a liability Release form and an Authorization for Emergency Treatment Release Statement form from parent or guardian.

Return complete form with deposit of \$ 100 payable to: CLAUDIA HEATH FARM.

- Please indicate child's riding ability to help us determine the most suitable horse for your child:

Not sure - Please arrange for an evaluation prior to the camp.

Never ridden before

Beginner - can walk and trot

Intermediate can walk, trot and canter, jump x-rails.

Advanced - can already do a course of small jumps.

-Does your child have any allergies?

yes

No

If yes, please explain: _____

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- Does your child have any emotional, behavior, or physical problems?

[] Yes

[] No

If yes, please explain: _____

-For us to be able to better match horse and student we need to know the students:

Age: _____

Height: _____

Weight: _____

- Please complete and return this form to reserve a space.

-Claudia Heath Farm reserves the right to dismiss any camper who in their opinion is a hazard to the safety and rights of others or who has rejected the rules of the farm.

-No discounts of fees will be offered for any reason for registrants arriving late or leaving early during the period for which they are registered.

PARENT'S AGREEMENT

I give permission for photographs and video footage of my child to be used by Claudia Heath Farm for promotional purposes. It is understood that, if accepted, camp fees are: \$550 advance camp; \$375 Beginner/Intermediate Camp. I agree to follow the payment schedule. I hereby give permission to Claudia Heath Farm to authorize the necessary medical treatment in the event of a medical emergency.

If I am available, I understand that CHF will always attempt to contact me before doing so.

Parent or guardian signature: _____ Date: _____

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