

Legacy Farm and Stable Camp Application

July 28 -August 1, 2020

Please Print and Write Legibly.... Cost \$400.00

Camper's Name _____

Age _____ Birthdate _____ Special Considerations _____

Parent Mailing Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Parent Contact and Phone _____

Capability of swimming _____

Parent Signature Consent for Water Sports _____

Emergency Contact Name & Phone Number _____

Previous experience _____

Allergies Y N (If yes please explain)

Medical History: _____

Current on tetanus shot: Y N

Handicapped/disability Y N (If yes please explain) _____

Any other considerations we need to know for your child/children _____

Parent's signature: _____ Date: _____