



Camp Registration 2019

Camper's Name Date Of Birth / / Sex

Address

..... (Postal Code)

Telephone (Residence) (Cell) (Other)

E-Mail

Please circle requested week:

March 4th March 11th June 24th July 1st July 8th (3 day) July 15th July 22nd

PLEASE NOTE: All Camp Sessions operate from 11:00 am to 5:00 pm, Monday to Friday (Holidays Inclusive) Except for July 8th which will be July 8th-10th.

CAMP COSTS: 5 day = \$750.00 plus HST 3 day July 8th = \$450.00 plus HST. \$300 deposit due upon registration

CONDITIONS

- 1) All Campers must be a minimum of eight years of age. (Camp is geared to riders between the ages of eight and fifteen years). Campers should be no lighter than 30 kilograms (65 lbs).
- 2) It is inevitable that every rider will sustain a fall. Therefore, if a camper has any condition which could be aggravated by a fall, you must consult your physician before commencing any equestrian activities.
- 3) All campers must supply themselves with the following: an ASTM approved riding helmet, an ASTM or BETA approved protective riding vest, long pants and flat soled boots with a low heel.
- 4) Each registration must be accompanied with a \$200.00 (two hundred dollar) deposit per session and a completing cheque dated no later than the start of the selected session. Any cancellation must be made at least fourteen days prior to the selected session, after which date deposits are non-refundable.
- 5) Sessions selected are a personal reservation, therefore no days missed may be made up, transferred or refunded.
- 6) The school reserves the right to terminate a camper's stay at its sole discretion. Any such cancellation will result in a full refund of the balance remaining in the session.
- 7) The Riding Academy at the Horse Palace cannot guarantee future bookings or lesson availability beyond the camp session(s) in which your child is registered.
- 8) The accompanying waiver of liability (see reverse) and Pick-Up Authorization Form must be completed and signed by a parent or legal guardian.

EMERGENCY INFORMATION

Health Card Number

Person to be contacted Telephone (Residence) (Other)

E-Mail.....

INFORMATION SHEET

What type of previous riding experience and where?

When was the last time you were on a horse?

Any allergies, perceptual, or physical difficulties?

Is the camper on any medication If so, what?

Signature of Parent / Guardian Name

[Type here]