

40 Fort Lee Road Leonia, NJ 07605 201-336-3370

2022 Summer Camp Checklist and Registration

Welcome to the Bergen Equestrian Center and thanks for choosing us for your 2021 summer camp experience. Enclosed is all the information you need for camp this year. Each week of camp will be packed with fun, friends and lots and lots of horses! Let us know if you have any questions or would like to schedule a tour of the stable before camp starts.

Campers Name: _____

- ____ Completed and Signed Registration Form
- _____ Bergen Equestrian Center Liability Waiver and Photo Release
- Bergen County Audubon Society Liability Waiver and Photo Release
- _____ \$150 per Week Deposit (non-refundable)
- Copy of Physical Exam with Immunizations (within last 12 months)
- _____ ASTM Certified Riding Helmet and Paddock Boots
 - ____ Drop-Off is 8:45 a.m. (not before) with a temperature check
 - Pick-Up is promptly at 1:00 p.m. (unless enrolled in Post-
 - Camp)

FOR OFFICE USE ONLY:			
All Forms Received:			
Received by:	Date Received:		
Amount Received w/ Application:	Method of Payment:	Balance Due:	



2022 Camp Registration Form

Camper's Name:	Age (on the 1 st day of camp):				
Date of Last Riding Lesson:		_Where?_			
Home Address:		City:		State:	Zip:
Rider's Height:		Rider's W	eight:		
Riding Level: (circle one)	Never Ridden	Walk	Walk/Trot		
*If the camper has previous riding experie before camp starts, for placement purpose				-	n evaluation lesson
Parent/Guardian Name:					
Phone:	Alt Phone:				
Email address:					
Camp Dates (I	Please check which	ch weeks	you are signin	g up for)	
Week 1 - Jun. 2	27 to July 1	Weel	c 2 - July 4 to J	uly 8	
Week 3 - July 11	to July 15	Week	4 - July 18 to .	July 22	_
Week 5 - July 25	i to July 29	Week	c 6 – Aug. 1 to	Aug. 5	
Week 7 - Aug. 8	to 12	Week	8 - Aug. 15 to	Aug 19	_
	Week 9 - Aug. 2	2 to Aug	. 26		
Space is limited. You may be placed of personal checks made out to Indian Held your space. Post Camp Sign-Up (\$175 per we	Hills Farm and cash.	A non-refu	ndable deposit of	\$150.00 per v	

Camp Week Dates: _____

kegistration Form (continued)

Emergency Contact Information:

	ned regarding important matters pertaining to my child, I authorize these dentification will be required at pick-up):				
	Relationship to Child:				
Daytime Phone:	Cell Phone:				
Name:	Relationship to Child:				
Daytime Phone:	Cell Phone:				
Medical:					
Pediatrician's Name:	Phone:				
Date of Last Physical Exam: dated within the last 12 months.	of Last Physical Exam: Please include a copy of your latest physical with immunizations I within the last 12 months.				
Any Medical Issues/Allergies? No	Yes, describe:				
	res, please describe				
Amount Due:					
Bergen County Residents (\$695/wee	ek): Post Camp/1pm-3pm (\$175 per week):				
Per Week Deposit:					
Balance Due (Less Deposit):					
Non-Bergen Residents (\$745/week)	: Post Camp/1pm-3pm (\$175 per week):				
Per Week Deposit:					
Balance Due (Less Deposit):					

I have read this entire application and I agree to abide by all terms, regulations and policies of the Bergen Equestrian Center, BEC Summer Camp and Indian Hills Farm. I have also read all liability and photo waivers and confirm I have the legal authority to sign said waivers. I understand camp attendance is contingent upon payment and return of all required paperwork. Payment <u>must</u> be made in full the Friday before the camper's week starts.

Signature of Parent or Legal Guardian