# HORSESHOE J DUDE RANCH

## DAY CAMP REGISTRATION 2027

Name _____ _____ _____ _____
(surname) (given name) (used name)

_____ _____ _____ _____
Address City Postal Code Phone No.

Cell#_____ e-mail _____

Height _____ Weight _____ Age ____ (as of July 1st) Sex ___ Birth date _____

Health Card Number _____ Riding Experience/Horse request

_____

Camp requested: _____(date)_____ _____ Camp Souvenir T-Shirt($35)☐_____

If your child has a food allergy, sensitivity, or other special need(s) please list them here: _____

Mother's Name _____ Father's Name _____

Phone: Home _____ Bus._____ Phone: Home _____ Bus. _____

Cell:_____ Email _____ Cell: _____ Email _____

Approved Riding Helmet: I will need to rent an equestrian riding helmet: Yes ☐ No ☐

==========

RATES: Include accommodation, constant supervision, snacks in the afternoon, use of camp facilities, & **many hours of horseback riding** over the acres of camp trails. Please pack a lunch for your child each day. Day camp rate: $680.00 + HST. Riding helmets available at a rate of $15 for the week.The Dude Ranch will make no refunds to campers who are sent home due to unacceptable language or conduct that is detrimental to the well-being of other campers. Although telephones are available, we strongly recommend that they be used only for emergencies. This will allow your child to focus on the program & enjoy their vacation at the ranch. Please **do not send cell phones** or other valuables including electronic devices to camp. The Dude Ranch cannot be responsible for any lost or damaged valuables.A $300(per week registered) non-refundable, but transferable, deposit is due with this registration. Sorry no credit cards / debit cards accepted. Payments can be made via cheques, cash, or etransfers to duderanchontario@gmail.com. Balance due on or before first day of camp. Please be aware that photos of your child may be taken for display or promotion of our activities. If you do not wish for your child to be photographed please let us know in writing prior to the first day of camp.

**Please fill out the health form and send with this to secure your spot.**

I understand that camp is an unplugged environment and my child will not bring any electronic devices such as cell phones, tablets, gaming devices, etc. Initials ____

Parent/Guardian Signature:_____ Parent/Guardian Name:_____ Date:_____

**32553 Erin Line Fingal,Ontario N0L1K0 (519)762-5402**
**Email completed form to: duderanchontario@gmail.com**

"CAMPS FOR KIDS SINCE 1957"

"CREATING MEMORIES THAT LAST A LIFETIME"