



HORSESHOE J DUDE RANCH

DAY CAMP REGISTRATION 2021

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: _____ Camp Souvenir T-Shirt(\$25) _____
(date)

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: \$479.00 + HST. Riding helmets available at a rate of \$10 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 \$150(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. 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.

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”