

 CAMP REGISTRATION

**STUDENT INFORMATION**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Town\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip\_\_\_\_\_\_\_\_\_

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age \_\_\_\_\_\_\_ Ht \_\_\_\_\_\_\_\_ Wt \_\_\_\_\_\_\_\_ M/F \_\_\_\_\_\_\_

Riding Experience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**WEEKLY RATE $340 Payment plan available if for the week, $60 for the day. $200 Deposit non-refundable per week reserved**

**Pay by Check, Cash or Credit Card plus fee**

**Camp Balance MUST be paid NLT first day of camp.**

1. \_\_\_\_\_ **April 21st – April 25th,** **SPRING CAMP** **Riding Every day.**
2. \_\_\_\_\_ **Nov 6th and 7th Fall Camp days**
3. **\_\_\_\_\_ Dec 26, Dec 27, Dec 29, Dec 30, Dec 31 –** **Everything Horse camp EVERY DAY 😊**

WARNING: Pursuant to New Jersey Statutes Annotated 5:15-1 et seq., an equestrian area operator is not liable for any injury to, or the death of, a participant in equine animal activities resulting from the inherent risks of equine animal activities

**CAMP WILL BE LOCATED AT SUFFOLK STABLES: 1418 Old Indian Mills Rd, Shamong NJ 08088. PH: (609) 667-8062**

***-------------------------------------------------------------------------------------------------------------------------------------------------------------------------***

***FOR OFFICE USE ONLY:***

**Credit Cards are now accepted. Checks to: Suffolk Stables LLC. Payments can be dropped or paid in the office.**

Date:\_\_\_\_\_\_\_ AMT:\_\_\_\_\_\_\_\_\_\_ Dep or Full: \_\_\_\_\_\_\_\_\_ Bal Due: $\_\_\_\_\_\_\_\_\_ Bal pmnt: $ \_\_\_\_\_\_\_\_ Bal Paid Date: \_\_\_\_\_\_\_\_