

 CAMP REGISTRATION

**STUDENT INFORMATION**

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

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

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

Mom’s Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dad’s Work Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Age (if minor) \_\_\_\_\_\_\_ Ht \_\_\_\_\_\_\_\_ Wt \_\_\_\_\_\_\_\_ M/F \_\_\_\_\_\_\_ Tshirt Size: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**WEEKLY RATE $400 - $450 Payment plan available if multiple weeks. See reverse page. ($200 Deposit non refundable per week reserved)**

**EARLY BIRD SPECIAL!!! $50.00 OFF EACH session paid in full upon receipt of application. Paid by Check, Cash or Credit card. (see reverse side for Credit Card)**

**Camp Balance MUST be paid 30 days prior to first day of camp.**

**1.\_\_\_ June 26–June 30 –**Everything Horse camp all levels: $400 **2. \_\_\_July 3-July 7 –** EverythingHorse camp all levels $400

**3.\_\_\_ July 17 - July 21 –** INTRO to Eventing week : $400 **4. \_\_\_July 24 to July 28 –** Farm Fair – Game show week $450

**5.\_\_\_Aug 7 to Aug 11** – Eventing Camp. Dressage, poles to 2’6 arena jumping and cross country course, Show on Friday $450

**6.\_\_\_Aug 14 to Aug 18** - ADULT ONLY 17 yr + Horse training, round penning, leg Wrapping/sweating, clipping, Basic - advance

horse care, drill team and much more $400

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) 346-7093**

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***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: \_\_\_\_\_\_\_\_\_\_

**PAYMENT** **PLAN:**

Total Due: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Deposit Paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ CK/V/PP/CC: \_\_\_\_\_\_\_\_\_

 Payment 2: Amount Paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ CK/V/PP/CC: \_\_\_\_\_\_\_\_\_

 Balance due \_\_\_\_\_\_\_\_\_\_\_\_

 Payment 3: Amount Paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ CK/V/PP/CC: \_\_\_\_\_\_\_\_\_

 Balance due \_\_\_\_\_\_\_\_\_\_\_\_

Payment 4: Amount Paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ CK/V/PP/CC: \_\_\_\_\_\_\_\_\_

 Balance due \_\_\_\_\_\_\_\_\_\_\_\_

Payment 5: Amount Paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ CK/V/PP/CC: \_\_\_\_\_\_\_\_\_

 Balance due \_\_\_\_\_\_\_\_\_\_\_\_

 Payment 6: Amount Paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ CK/V/PP/CC: \_\_\_\_\_\_\_\_\_

 Balance due \_\_\_\_\_\_\_\_\_\_\_\_

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Credit Card Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Exp: \_\_\_\_\_\_\_\_\_\_\_\_ Sec Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name on Card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Ph: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State:\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I give permission to Suffolk Stables to Please debit the credit card above for the amount of $\_\_\_\_\_\_\_\_\_\_\_\_ on the dates written above

A fee of 0.0325% is added to your amount per charge.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_