

Summer Camp Registration Form

Camper Info

Camper's name

Address

Birthday

Parents Info

Parents Name

Parents Phone

Secondary Guardian Name

Phone number

Camp Session Attending all sessions \$400

Date

Deposit Date/ Amount

Balance date/Amount

Please List any previous riding experience below

Please Fill out and email PDF to lnyinger@gmail.com

Medical Form

Liability Form

Camp Registration

Please Mail all forms and Check (zelle, paypal, venmo) to

13733 Foundation Rd, Croton, Oh 43013

Text Lindsay at 614-348-5915 or email lnyinger@gmail.com for E-pay