

Pleasant Hill Farm Application for 2023 Summer Camp

Rider's Name: _								
Age:	Choose	your T-Shirt Siz	e: YS	ΥM	YL	AS	AM	AL
Address:								
								
Parent/Guardian								
Phone: (home)_		(cell)		(work)			
E-Mail Address:								
Medical Conditio	ns, Allergies,	Medications, et	tc. :					
Rider's Experien	ce:							
Referred to Plea								
Se Se	ession 2: Jun ession 3: July ession 4: July	ne 19 th – June 23 ne 26 th – June 30 y 17 th – July 21 st y 24 th – July 28 th g 7 th – Aug 11 th) th Begi ^t Begin d Begin	nner// nner/A nner/A	Advar dvan dvan	nce \$ ce \$ ce \$	450(8: 450(8: 450(8:	30AM to 1PM 30AM to 1PM 30AM to 1PM
After Cam	O (Sessions 2	to 5 ONLY): Mon (Number of day						Thurs
A \$100 non-refundab remaining balance is	•		to hold y	our sp	ot in the	e cam	p you pı	efer. The
Mail the application and Pleasant Hill Far	•	v Sharon Church	Road /	/ Hillsk	oorou	gh, N	C 272	78
Warning: Under North injury or death of a pa activities. Chapter 99	articipant in equir	ne activities resulting						
I have read the above	statement and	I am aware of the ris	sks of hor	ses an	d equin	ie acti	vities.	
Signature of Parer	nt/Guardian:					Date	e:	