

**Pleasant Hill Farm** Application for 2025 Summer Camp

Rider's Name:								·····
Age:	Choose	your T-Shirt	Size: <b>YS</b>	ΥM	YL	AS	AM	AL
Address:								
Parent/Guardian N	lame:							
Phone: (home)		(cell)			(w	ork)		
E-Mail Address:								
Medical Conditions	s, Allergies	, Medicatio	ns, etc.:	<b></b>	1 1 1 1			
Rider's Experience Referred to Please Session 1: Jun Session 2: Jun Session 3: Jun	ant Hill by: ne 23 <sup>rd</sup> - J y 21 <sup>st</sup> - Ju	lune 27 <sup>th</sup> B ly 25 <sup>th</sup> Begi	eginner nner to	to No Novic	vice e \$55	\$550 50 (8:3	(8:30AN 0AM to	/ to 1PM) 1PM)
After		on Tue umber of da						

A \$100 non-refundable deposit is due with this application to hold your spot in the camp you prefer. The remaining balance is due the first day of camp.

Mail the application and deposit to: Pleasant Hill Farm / 1818 New Sharon Church Road / Hillsborough, NC 27278

Warning: Under North Carolina law, an equine activity sponsor or equine professional is not liable for an injury or death of a participant in equine activities resulting exclusively from the inherent risks of equine activities. Chapter 99E of the North Carolina Statutes.

I have read the above statement and I am aware of the risks of horses and equine activities.

Signature of Parent/Guardian:\_\_\_\_\_ Date:\_\_\_\_\_ Date:\_\_\_\_\_