

# Raintree Equestrian Center

## 3 Day Summer Horse Camp 2024

### Registration Form

Child's Name \_\_\_\_\_

Age: \_\_\_\_\_ Gender: \_\_\_\_\_

Parent's Name \_\_\_\_\_

Parent's Employer \_\_\_\_\_

Work Phone \_\_\_\_\_

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

Email \_\_\_\_\_

Home Address \_\_\_\_\_

List 2 emergency contacts & phone numbers.

1. \_\_\_\_\_

2. \_\_\_\_\_

Others who may pick up your child.

\_\_\_\_\_  
Please notify us in writing if your child will be picked up by someone else or picked up early.

Child's riding level    Beginner \_\_\_\_ Intermediate \_\_\_\_

I give my permission for my child to participate in all activities at Raintree Equestrian Center.

In case of emergency, I give my permission for my child to receive medical treatment.

\_\_\_\_\_  
Parent/Guardian Signature

How did you hear about us? \_\_\_\_\_

What week(s) will your child be attending? Circle week(s) below.

**Camp Sessions**    June 3-7    June 10-14    June 17-21    June 24-28    July 1-5

Please return this form with \$100 deposit to reserve your child's place. We look forward to having your child join us for summer fun! Contact # 901-857-4074