Camp Registration Form

\*Please check in advance prior to sending in registration, if space in desired camp is available, by texting 616-610-9652 or emailing posthillfarmllc@gmail.com

Camp Dates (Please circle.)

June 10-14, 2024 June 24-28, 2024 July 8-12, 2024

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age: \_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

English or Western (circle one if you have preference)

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

Payment Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_ ($50 deposit due to reserve spot. $350 balance due 1st day of camp.)

Check #: \_\_\_\_\_\_\_\_\_

Cash (instructor initials): \_\_\_\_\_\_

Emergency Contact Information:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to Camper: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Allergies or other important information:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Conditions of Registration A $50.00 deposit is due with registration with balance paid by the sign-in on 1st day of camp. Checks made out to Post Hill Farm LLC. Checks/Paperwork can be mailed to Nicole Van Dyke 9718 Liberty Road Twinsburg OH 44087. Deposit is NON-REFUNDABLE. A signed EQUINE RELEASE AND HOLD HARMLESS WAIVER needs to be sent in with camp registration— available under the FORMS tab. A completed EMERGENCY MEDICAL FORM must be turned in by the 1st day of camp, or camper will not be allowed to participate in camp until the form is on file at farm. If someone other than parent will be picking camper up, a note from parent must be sent in that day. PLEASE NOTE—BARN ADDRESS IS 9736 LIBERTY ROAD, AND IS different THAN MAILING ADDRESS. I understand and agree with the conditions herein.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_