

## Application for Summer Camp

Full Name: \_\_\_\_\_ Male \_\_\_ Female \_\_\_

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

City: \_\_\_\_\_ Prov. \_\_\_\_\_ PC: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_

E-Mail address: \_\_\_\_\_

\*please note that ALL correspondence will be sent to this email address\*

Birthdate: \_\_\_\_\_ Height: \_\_\_\_\_ Weight \_\_\_\_\_

Family Doctor \_\_\_\_\_ Dr.'s Telephone #: \_\_\_\_\_

Health Card No \_\_\_\_\_

T-shirt size: Youth S \_\_\_ M \_\_\_ L \_\_\_ Adult S \_\_\_ M \_\_\_ L \_\_\_

**Camper Experience** (Please check off the most accurate description of your child's riding experience and ability).

Extreme Beginner - Has been on a horse less than 5 times.

Beginner - Walk, stop and steer, some trotting.

Novice - Walk, sitting and posting trot, some canter

Intermediate – Walk, trot, canter with balance and control; some jumping

Advanced - Walk, trot, canter and jump with confidence and accuracy

Is there any allergies, medical or behavioral issues or food restrictions we should be aware of? \_\_\_\_\_

If yes, please describe:

Select Session: 1<sup>st</sup> Choice \_\_\_\_\_ 2<sup>nd</sup> Choice \_\_\_\_\_

**Signature of Parent/ Guardian:**

Full name of Parent/Guardian \_\_\_\_\_

Phone # where Parent can be reached during the day during camp week:

**Day Camp** attach a cheque for \$100.00 and a postdated one for \$300.00 for each week of day camp.

**Residential Camp** attach a cheque for \$150.00 and a postdated one for \$475.00 for one week of resident camp.

**2 Week Resident Camp** attach a cheque for \$300.00 and a posted one for \$850.00

Postdate final cheque for **June 15, 2016** If paying *in full* (cheques dated) before Mar 1st 2016 you may subtract \$25 from the cheque. Make cheques payable to **Teri Lindsay**

and mail to:

Teri Lindsay

1158 Birch Rd

Gilford, Ontario

L0L 1R0

705-456-5075 or 1-866-237-8386 [info@southalgonquincamp.com](mailto:info@southalgonquincamp.com)