



2023 Specialty Riding Camp Registration Form

Name of rider: _____ Age as of July 1st, 2023: _____

Health Card Number: _____ (Optional)

Street: _____ City: _____ Postal Code: _____

Home Phone: _____ Mother's Alternate Phone: _____

Father's Alternate Phone: _____ Emergency Contact Number: _____

Email Contact: _____

PLEASE NOTE: Registration will not be finalized unless accompanied with a completed registration form.

	Dates	Number of Days	Check Box
Show Prep	July 31 - August 4	5 days	<input type="checkbox"/>
Adult Camp	August 8 - August 11	4 Days	<input type="checkbox"/>
Hunter Camp	August 14 - August 18	5 Days	<input type="checkbox"/>
Dressage Camp	August 21 - August 25	5 Days	<input type="checkbox"/>

*Will you be requiring childcare during the week of August 8 - 11 (Adult Camp)? Yes or No

* If so, how many children will be attending? _____

Are there any circumstances that the camp staff should be aware of?

(e.g. Allergies, required medications, family situations, etc.)

Please outline below:

I hereby apply for the registration for the child named above for Harrogate Hills Summer Camp as indicated by the checked boxes above. In consideration of the acceptance of this application, I agree to the following conditions.

- i. Myself and/or my child may participate in all summer activities at the campsite
- ii. The undersigned gives permission to the instructors and or directors to act on his/her behalf in the event of an emergency
- iii. The undersigned consents to the use, by Harrogate Hills Riding School, of campers' likeness for publicity purposes
- iv. Riders new to Harrogate Hills Riding School are encouraged to have an assessment in order to ensure proper summer placement.

(Our insurance policy requires that we also must ask you to fill out the separate, enclosed waiver and return it with your registration. Thanks.)

Name (please print): _____

Signature: _____

Date: _____

How did you hear about Harrogate Hills Summer Camp? _____
