

## **Double Rainbow Farm**Equestrian Camp Application

	Camper Information						
	Camper Name	<b>)</b>	A	Age	Girl/Boy		
	Address		F	Phone			
	School		Grade		Birthdate		
	Parent's email	 [			Cell Phone		
	Previous Ridi	Health and Emergency Information					
	Health and Emergency Information  Allergies						
	Allergies						
	Current Medic	Current Medications					
Summer Camp		Em	nergency Contact	ts			
sessions @ \$10 or \$270/3 day o	<u> </u>						
\$50 deposit	1	Name	Phone		Relation to child		
Balance due before 1 <sup>st</sup> day of session		Name	Phone		Relation to child		
		Signature of Parent or Guardian			Date		
Thanksgiving Camp		Please atta			to completed application a		
Spring Break Camp		186	submit with pa 60 Adner Rd Hauş	-			

Make checks payable to:

and put child's name on check