

Wyndtree Farm

Camp Application/Registration

CAMPER INFORMATION:

Camper Name: _____ Phone: _____ E-mail: _____
Address: _____

If camper is younger than 18, please answer these questions

Mother's Name: _____ Father's Name: _____

Mother's Phone: _____ Father's Phone: _____

Date of Birth: _____ Grade in School: _____ School: _____

Other activities and interests: _____

MEDICAL INFORMATION:

Family Doctor: _____ Name of Practice: _____

Health Insurance Carrier: _____ Policy Number: _____

Hospital Preference: _____ Allergies: _____

** Please attach a copy of your insurance card to this application

Please explain any health impairments or serious illness which may affect participation in horse/outdoor activities (i.e. asthma, diabetes, allergies):

Are there any other personal characteristics that you would like us to know?

EMERGENCY CONTACTS:

Name: _____ Relation: _____ Phone: _____

Name: _____ Relation: _____ Phone: _____

PRIOR EXPERIENCE: (check all that apply)

- | | |
|---|--|
| <input type="radio"/> I can walk a horse | <input type="radio"/> I have jumped full courses of fences 2'3" or higher |
| <input type="radio"/> I can trot a horse | <input type="radio"/> I have shown at rated shows over fences 2'6" or higher |
| <input type="radio"/> I can canter a horse | <input type="radio"/> Other (please describe) |
| <input type="radio"/> I have jumped X-rails | |
| <input type="radio"/> I have jumped 2' fences | |

I/we understand that it is the responsibility of each camper to participate in the whole program, including activities of work, play, and learning. We recognize that campers must follow safety instructions, remain in areas designated by staff and refrain from behavior that is harmful to themselves or others. Failure to adhere to camp policies may cause Wyndtree Farm, LLC to dismiss a camper, without refund of camp fees.

Signature of **camper** _____

Initials of **guardian** _____

For campers under 18, I (parent) understand that I am not to leave my child at Wyndtree Farm unless a camp staff member is there to receive and supervise my child. Wyndtree Farm LLC is not responsible for lost or stolen items.

I understand that I/my child may be photographed, and consent to the photographs being used for promotional purposes. Campers' names will not be used in conjunction with any images.

CAMP SESSIONS: If you're unsure of which session is most appropriate, please contact a Wyndtree farm instructor

Please select the camp that you would like to attend:

Beginner/Intermediate : June 19-23

Beginner/Intermediate: June 26-30

If space permits, I would like to attend BOTH beginner/intermediate sessions

Adult: July 3 -7

Advanced: July 10-14

T-shirts: One camp T-shirt is included in the camp fee. Additional shirts are available for \$20 (each). Please indicate sizes and quantity below. **Size:** Youth/Adult S / M / L / XL Quantity: _____

Camp Fee (\$500) _____ \$ _____

Additional T-Shirt(s) (\$20 ea.) _____ \$ _____

Total Amount =

Registration fee of \$150 must accompany application (this portion of the fee is *non-refundable*). **Balance of all fees is due on or before the start of camp.**

Please make checks payable to "Wyndtree Farm". Please fill out, sign, and return this form with payment to Wyndtree Farm, 1662 Amana Rd. NW; Swisher, IA. 52338

Client or Parent/Guardian Signature _____

Date: _____