

JG Equines, LLC Pony Camp Registration Sheet

Please fill out all the forms below.

Camper's Name _____ T-Shirt Size YS YM YL

Birth Date ____/____/____

Allergies _____

Street Address

____ City _____ State _____ Zip Code

_____ Telephone (____) _____ - _____ Cell Phone (____)

_____ - _____ Emergency Contact Name _____ Relation _____

Phone (____) _____ - _____

Parent Email

Camp Dates

(Monday thru Friday, Drop off between 9:30 and 10 am, pick up at 3pm)

Please check the dates your child plans to attend.

____ **June 26-30**

____ **July 10-14**

____ **July 24-28**

____ **August 7-11**

Please attach a copy of current insurance card when returning these forms. Every student is also to have a signed release form (need to sign a new form every year).

\$100 **Non-Refundable** Deposit is due upon registration to hold your spot, balance is due 2 weeks before start of camp! Deposit can be transferred to a different week as long as it's within 2023 camp dates.

Camp Prices

\$350 per week *DISCOUNTS AVAILABLE FOR MULTIPLE STUDENTS FROM ONE FAMILY*

Horseback Riding Questionnaire

Please fill out this questionnaire to help us prepare for your time at camp. This form is necessary so we can match horse and rider appropriately and therefore give campers a great time at camp. Thank you!

Camper's Name _____

Age _____

Height _____

Riding Experience (check one)

___ Pre-Riding (never been on a horse, afraid of horses and/or may need support to sit balanced in saddle)

___ Beginner (ridden a horse less than 5 times, little to no experience)

___ Intermediate (taken more than 5 horseback riding lessons and performs basic riding skills)

___ Advanced (takes/has taken horseback riding lessons consistently, can walk/trot and perform basic riding skills, confident and comfortable when riding/working with horses)

Please note, all horses and ponies are assigned by the Camps Director at their discretion. We take into consideration the age/height/ experience of campers to ensure a safe and enjoyable time at camp.

Photo Release

I, _____, the parent or legal guardian of _____(child) grant JG Equines, LLC to use the photographs and/or videos taken during camp for any legal use, including and not limited to: publicity, copyright purposes, illustration, advertising, and web content.

Parent/Guardian's Signature _____

Date: _____

Child's Name: _____

Phone Number: _____

Medical Consent Form

In case of emergency, JG Equines, LLC and Kimberly Pastucka has my consent to authorize medical care for my child(ren) listed below:

Our family physician is

: _____ His/her address is:

_____ His/her telephone

number is: _____

Our hospital preference is: _____

Allergies: _____

Contact me immediately at:

_____ If unable to contact me,

please call:

Signature: _____ **Date:** _____

Name: _____

Address: _____

Telephone: _____