

Canyon Lake Farm – Training Center

2009 Summer Horse Camp

Full Sessions M-F

Half Sessions MWF

8:30am to 2:00pm

Session One: July 6-10 Intermediate Riders

Session Two: August 10-14 All Levels

Session Four: August 24-28 All Levels

Camper Requirements:

- Ages 5 to 13
- Campers must bring sack lunch. Snacks and water provided. Pizza on Friday.
- Campers must arrive in long pants and heeled shoes (riding or hiking boots).
- Bring a change of clothes (shorts and shoes).
- A riding release form must be signed by legal guardian prior to start of camp (available on first day of camp)
- A non-refundable deposit of \$100 is due when Registration Form is submitted to Canyon Lake Farm – Training Center

Late Pick-Up Available

Camp ends at 2:00pm each day. If for any reason you are unable to pick up your child at this time, late pick up is available with prior notification and for an extra cost of \$50 per session. Please indicate on your registration form if late pick up is needed and include what time you will be able to pick up your child (no later than 5:30 pm).

Sessions are limited

Each session is limited to 10 campers. If camp is full we will inform you immediately and place you on a wait list. Your \$100 deposit will be held until your child has been placed in camp or it will be returned back to you.

Registration Form

Canyon Lake Farm - Training Center

2009 Summer Horse Day Camp



Indicate which session(s) attending:

- [] July 6-10 Full \$300
[] July 6-10 Half \$200
[] August 10-14 Full \$300
[] August 10-14 Half \$200
[] August 24-28 Full \$300
[] August 24-28 Half \$200

Pick-up time: _____

A non-refundable deposit of \$100 is due at time of registration. Please send check payable to Tracy Fincher to:

**Horse Camp 2009
Attn: Tracy Fincher
12975 Saddleback Place
Chino, CA 91710**

**Please email Tracy at canyonlakefarm@att.net
if you have any questions or concerns**

Total Amount Enclosed: _____

Campers Name: _____

Boy/Girl: _____ Age: _____

Legal Guardian: _____

Home Phone: _____ Daytime Phone: _____ Cell Phone: _____

Address: _____ City/Zip: _____

Emergency Contact: _____ Relationship: _____

Emergency Phone: _____

I agree to read and understand all registration information - including: liability release form, waiting list/reservation information, and cancellation policy. I certify under the penalty of perjury that my son/daughter has no medical limitation that would impair his/her ability to perform the lessons specified in this day camp.

Signature: _____ Date: _____