

## Summer Riding Camp 2020 Registration Form

| Please print neatly                |   |  |
|------------------------------------|---|--|
| Child's Name                       |   |  |
| Child's Age                        | Child's Height                                  |  |
| Parent's name                      |   |  |
| Address                            |   |  |
| Phone Number                       |   |  |
| –<br>E-Mail Address                |   |  |
| Please circle the d<br>July 6 - 10 | ates that you would like to att<br>July 20 - 24 | end:<br>August 3 - 7   |
|                                    | Hours 9AM to 3PM (sharp                         | )  |
| •                                  | ek (if signed up for 2 or more v                |  |
| -                                  | undable deposit to reserve spo                  |  |
| Payment in fu                      | Ill required at least 24 hours a                | head of start  |
| Application Received               | 1600A Potshop Ro                                | Black Horse Stables<br>ad Norristown, PA 19403<br>267-304-5228 |

Amount Paid:

amandaenwright@yahoo.com