



1061 Capella School Road, King, North Carolina 27021

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www.tokotahorsestables.com

SUMMER CAMP APPLICATION

CAUTION: PLEASE READ CAREFULLY BEFORE SIGNING

Welcome to Tokota Horse Stables summer camp! Our goal is to make your summer camp a pleasant experience for both you and the horse!

Enjoy your camp, and if you have any concerns, questions, or ideas, don't hesitate to let us know!

Before we schedule your camp week, we MUST RECEIVE THIS APPLICATION AND SIGNED PARTICIPANT RELEASE OF LIABILITY FORM from you. Please fill this form out completely, noting your desired camp week, and return as soon as possible. A non-refundable deposit of \$50 must accompany this form. Please note that this is a non-refundable deposit; however, should your desired camp week not be available, we will refund your deposit in full. Payments in full are due by the 1st day of camp. Please make checks payable to Tokota Horse Stables. Someone will call you to confirm your camp week.

DATE _____

NAME _____ BIRTHDATE _____ BOY/GIRL (Circle)

ADDRESS _____ ZIP _____

PARENTS' NAME _____ EMAIL _____

PARENTS' ADDRESS _____ TEL. _____

PARENTS' OCCUPATION(S) _____

CHILD'S GRADE IN SCHOOL _____ HEIGHT _____ WEIGHT _____

RIDING EXPERIENCE (CIRCLE ONE):

BEGINNER ADVANCED BEGINNER INTERMEDIATE ADVANCED

DESIRED CAMP DATES (Please circle)

Camp runs for a 1-week period – Monday through Friday from 9 a.m. to 2 p.m. The cost for this 1-week camp is \$300.00. Tokota Horse Stables provides lunch daily for each student. On Friday of each camp week, parents are invited to come and observe the progress their child has made during the week. Also, on Friday we will celebrate the students' accomplishments with hot dogs or pizza and cake. Parents don't forget your cameras! **Please circle** your desired camp week:

Jun 14th-Jun 18th

Jul 12th-Jul 16th

EMERGENCY CONTACT NAME/RELATIONSHIP/TEL. _____

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HEALTH ISSUES/ALLERGIES (if any) _____

PHYSICAL LIMITATIONS (if any) _____

HEALTH INSURANCE CARRIER _____

POLICY HOLDER'S NAME _____

GROUP NUMBER _____ MEMBER NUMBER _____

CAMPER SIGNATURE _____

PARENTS/GUARDIANS SIGNATURE/ _____ DATE _____

_____ DATE _____