NORTH CREST EQUESTRIAN CENTER 2017 SUMMER CAMP REGISTRATION

Name:	Age	
Parent Name:		
Address:		
Phone:		
Email:		
Summer of 2017 Session Dates (C	Check one):	
June 12 – June 16		
June 26 – June 30		
July 10 – July 14		
July 24 – July 28		
August 7 – August 11		
August 14 – August 18		
parent/guardian is unable to atten	be signed by a parent/guardian on the first day of camed please check the box below and we will e-mail you send with your child. Children will not be allowed to ase/Waiver form.	ıa
Please e-mail a Release/Wa	aiver form	
I have enclosed a check in t Center to hold my child's sp	the amount of \$299.00 payable to North Crest Equest pot.	trian
• •	itive experience for your child, we would like you to s work with them. If your child has any special needs, we them before camp starts.	