



REGISTRATION FOR 2017

Please Print

Child's Name: _____

Household/Primary Contact: _____ Relationship to Participant: _____

Address: _____ City: _____

Province/State _____ Postal Code: _____ Home Ph #: _____

Parents Home Email: _____ Cell # _____

Work Ph #: _____

Date of camp: _____ **Please call/email to check for vacancies.**

Emergency Contact Name & Ph# : _____

Birthday _____ Age as of July 1, 2017: _____ Weight: _____ (limit 180lb)

Riding Experience: Please give us some details of your riding experience _____

How did you hear of us? Internet ____ what site _____ Friend ____ Poster ____

Have you had a bad horse experience? _____

Applicant **must** be healthy and able to participate **fully** in a **vigorous outdoor** program.

Payment Terms:

Cost \$750.00 + GST = **\$787.50**/person, paid in full upon registration

We take Visa, M/C(add a 5% convenience fee) or e-money transfer, (please send e-money transfers to: admin@wildhorsecamp.com Please call with your credit card number).

Arrive: Sunday after 4:00pm Depart: Friday 4:00 pm Late pick up available at extra cost

I hereby certify that I have read and understand this application and that all information given is correct.

Parent/Guardian Name --Please print _____ Signature of parent/guardian _____ Date: _____

FOR OFFICE USE ONLY

Paid by: _____ Date Received: _____

PH: 1- 403-729-2910 www.wildhorsecamp.com admin@wildhorsecamp.com
Wildhorse Mountain Ranch & Outfitters Rocky Mountain House, AB T4T2A3