

Cappaleigh Farm
2009
Summer Camp Registration

Camper's Name: _____ Age: _____

Parent of Guardian Name: _____

Address: _____

Home Phone: () _____ Cell Phone: () _____

E-Mail : _____

Emergency Contact : _____ Phone () _____

Riding Experience:

- None
- Beginner
- Intermediate
- Advanced

Select Camp Session:

Beginner / Intermediate Camp : June 22-26 and August 10-14

Intermediate / Advanced Camp: July 20-24

1st Choice: _____

2nd Choice : _____

T-Shirt Size:

- Child's small
- Child's medium
- Child's large
- Adult small
- Adult medium

Deposit:

A non-refundable deposit of \$50 is needed to reserve your space. The balance is due by the first morning of camp.

Please enclose Registration Form, Riders Release Form and deposit made

Payable to "Cappaleigh Riding Academy" and mail to :

Cappaleigh Farm

15345 N. 95th Street, Longmont, Colorado 80504

If there are any questions, please contact us at

(303)687-5875 – (303)304-0982- cappaleigh@yahoo.com - [www. Cappaleighfarm.com](http://www.Cappaleighfarm.com)