

X-treme HorsePower DAY CAMP



June 10—14 July 22—26 9am-2pm
for Boys and Girls ages 8-14

HORSE CARE TRAIL RIDES OUTDOOR EDUCATION
COOPERATION & COMMUNICATION * RESPONSIBILITY & RESPECT
CRAFTS CANOEING FISHING

REGISTRATION

DAY CAMP 1: 6/10—6/14 ☐

DAY CAMP 2: 7/22-26 ☐

Name _____ Age _____ DOB ____/____/____

Address _____ City _____ Zip _____

Telephone (____) _____ (____) _____
Who? Who?

Parent/Guardian Name(s) _____

Child resides w/ ☐ Both Parents ☐ Mother ☐ Father ☐ Foster Parents ☐ Relative _____

If seeking Reduced Fee or Scholarship, then complete the following:

Household Income, including Child Support, Disability, Social Security, etc. \$ _____/year

of children in home _____

Does Child have any of the following that we should be aware of:

☐ Learning Delay or Disability ☐ Social Difficulties ☐ Sensory Issues ☐ Behavioral Problem
☐ Situational issues (Family/home/neighborhood) ☐ A mental/emotional Diagnosis (Anxiety, ADHD, etc)

If Yes, please specify: _____

Does Child have Food Allergies? _____ Asthma? _____

Require medication between 9am and 2pm? _____

As the Parent/Guardian of _____, I wish for aforementioned child to participate in the X-treme HorsePower Day Camp 2019 at Heavenward Farm and Horsemanship. I can provide or arrange transportation at the starting and ending times. I understand that my child may be dismissed from camp for health or behavioral reasons, at the sole discretion of the Director, and that No refunds are given within 14 days of the start date. I attest that all information contained herein is true and accurate.

Signature _____ Date _____

Submit Registration in person, email to admin@heavenwardfarm.org, or mail to Heavenward Farm and Horsemanship, 7084 Ludlum Rd., Morrow, OH 45152