Westminster Farm

## 2019 SUMMER CAMP REGISTRATION FORM

Please complete this Registration Form and the attached Release Form and Mail with Deposit Amount(s) to: Westminster Summer Camps at **2730 Regatta Way, Tuscaloosa, AL, 35406** 

or Email to <a href="mailto:rkhill1@crimson.ua.edu">rkhill1@crimson.ua.edu</a> -We do accept Visa/Mastercard for your convenience.

Please provide Name of Cardholder/Account Number/Exp Date (MM/YY)/CCV Code from Back of Card Deposit Amount(s) will be processed upon receipt of Registration Form and Balance will be processed the day prior to the start of applicable camp session.

Upon receipt/processing of your registration, you will receive a confirmation email and camp itinerary which will include a listing of required items and you will be contacted by the camp director of your selected session. We look forward to seeing all of our campers this year. We have lots of new, fun activities planned for 2019 Should you have any questions, please contact Rachel at (770)871-6034 Thank you!

PERSÓNAL INFORMATION

Riders Name:

Address:		<del></del>
Citv:	State:2	
City: DOB: (MM/DD/		
YY)		
Desired Session(s):		
#1 June 3-7		
#2 June 10-13		
#3 June 17-20		
#4 June 24-28		
# 5 July 8-12		
# 6 July 15-18		
# 7 July 22-26		
Camp Fees:		
\$350 per session		
\$75 Deposit per Session Req with Registration Fo		
Riding Experience: (Please Check One) Beginner		
Number of Years Riding:		
Medical Concerns:		
PARENT/GUARDIAN INFORMATION Name:		
Address:		
City: Contact # Prior to Camp: ( )_	State:	Zip:
Contact # Prior to Camp: ( )_ Email:	During Camp Ho	urs: ( )
EMERGENCY CONTACT (Other than Above) Name:		
Relationship to Rider:		Contact #: ( )
or()_		
PHYSICIAN INFORMATION		_
Name:	Contact #: ( )	