

# Westminster Farm Summer Camp 2020 Registration Form

Welcome Campers! Please complete this Registration Form and the attached Release Form and mail with a \$75 deposit to: Westminster Summer Camps c/o Westminster Farms, 2730 Regatta Way, Tuscaloosa, AL 35406 or email to [kathleenequine@gmail.com](mailto:kathleenequine@gmail.com)

-Please make checks payable to Westminster Farms.

-We do accept Visa/MC/Disc/Amex for your convenience. Please provide name of

cardholder, account number, and Exp Date  
(MM/YY)/

-Deposit amount (\$75.00) will be processed upon receipt of registration. The balance will be processed the day prior to the start of the applicable camp session.

Upon receipt/ processing of your registration, you will receive a confirmation email and camp itinerary

We have lots of new, fun activities planned for 2020. Should you have any questions, please contact Kate at [kathleenequine@gmail.com](mailto:kathleenequine@gmail.com)

<b>Riders Name:</b>		
Address:		
City:	State:	Zip Code:
DOB (MM/DD/YY)		

Desired Session(s):	Dates	Times	Price
Session 1 (4 days) <input type="checkbox"/>	June 8th - 11th	9 am - 1 pm	\$325 per week

Desired Session(s):	Dates	Times	Price
Session 3 (4 days) <input type="checkbox"/>	July 13th - 16th	9 am - 1 pm	\$325 per week
Session 4 (4 days) <input type="checkbox"/>	July 27th - 30th	9 am - 1 pm	\$325 per week

<b>Riding Experience ( check one )</b>		
Beginner <input type="checkbox"/>	Intermediate <input type="checkbox"/>	Advanced <input type="checkbox"/>
Number of years riding:		
Riding frequency:		

<b>Medical concerns / Allergies:</b>
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<b>Parent/ Guardian Name:</b>		
Address:		
City:	State:	Zip Code:
Contact # Prior to Camp		
Contact # during camp hours		
Email		

<b>Emergency Contact if other than above:</b>
Relationship to camper:
Contact #:
Other Contact #:

<b>Physician Information:</b>	