

Saving Grace Horse Rescue



Lessons Leasing Board

204 John Scott Rd
Aiken, SC

Summer Riding Camp 2017 Registration Form

NAME _____ BIRTHDATE _____ GENDER _____
ADDRESS _____ CITY _____ ZIP _____
PARENTS' NAME _____ E-MAIL _____
PHONE _____ CELL _____ WORK _____
CHILD'S GRADE IN SCHOOL _____ HEIGHT _____ WEIGHT _____
HEALTH PROBLEMS? _____

DESIRED CAMP DATES (Please check the appropriate boxes)

Camp runs for three 1 week periods starting June 19-June 23, July 17-July 21, and August 7-August 11. Please check the session(s) you plan to participate in:

Full DAY CAMP, 1-week sessions, \$150, Monday-Friday, 9am-4pm. Camp includes lunch. (check the weeks you plan to participate)

June 19-June 23 July 17-July 21 August 7-August 11

Total number of weeks _____ Price _____ Amount Enclosed _____

Release Statement

I understand that horseback riding is a high-risk sport and am participating at my own risk. I hereby assume this risk and further do hereby release and hold harmless the Owners of Saving Grace Horse Farm, their volunteers, trainers and Staff from all liability for negligence resulting in accidents, damage, injury or illness to myself and to my property, including my horse.

Parent/Guardian Signature: _____

Date: _____

*Please make checks payable to **Jackie Allen**

Mailing address **204 John Scott Rd Aiken SC 29803