

2017 Winter/Show Camp Registration Form

Please check off session/days you would like to attend

- Show Camp January 2-5
 Winter Camp December 27
 Winter Camp December 28
 Winter Camp December 29
 Winter Camp January 2
 Winter Camp January 3
 Winter Camp January 4
 Winter Camp January 5

Cost: Four day show camp (January 2-5) is offered at a cost of **\$300.00 + HST**. Winter Camp days are offered at cost of **\$75.00 + HST per day**. Helmet rental is an additional **\$10.00 +HST** per day. Campers that have their own helmet must have helmets that meet ASTM safety standards.

Early Drop-off- 7:30-8:30 a.m. (add \$10.00 per day) / **Late pick Up- 4:00-5:30p.m.** (add \$10.00 per day)

A current dated cheque, email transfer, credit card or Interact payment for the full amount, along with a completed registration form will secure a day/session. Each day/session allows for a maximum of 24 campers, therefore, space is limited and registration will be accepted on a first come, first served basis (must include payment to be considered a completed form). A \$50.00 N.S.F. fee will be charged for all cheques that are returned from the bank for any reason.

By signing below, the student/parent/guardian understands that there is an inherent risk in the sport of horseback riding and horse handling and assumes all liability and responsibility for the use of the horse, tack, facilities and equipment. No refund will be given after November 30th. All medical information must be disclosed.

The undersigned hereby agrees to hold Pickering Horse Centre Ltd, the staff and all affiliates free from any claim whatsoever, for damages or injury to person or property, no matter the cause and agrees to all the above stated terms.

Camper's Name: _____ Age _____ Parents Names: _____

Riders Experience: Currently rides at Pickering Horse Centre Beginner (Never Ridden or limited experience)
 Novice (Experience at the walk/trot) Intermediate (Experience at the walk/trot/canter) Advanced (Experience jumping)

Address: _____ City: _____ Code: _____

Home Phone: (____) _____ Other: (____) _____ E-mail: _____

Medical Problems/Allergies/Learning Disabilities: _____

If extended hour care (early drop off or late pick up) is required please check off the days it is needed:

Monday AM PM Tuesday AM PM Wednesday AM PM Thursday AM PM Friday AM PM

Date: _____ Parent/Guardian signature: _____

Registration Payment Details * PLEASE MAKE CHEQUES PAYABLE TO PICKERING HORSE CENTRE LTD

Show Camp Registration: January 2-5	1	x	\$300.00 (4 days)	
Winter Camp: December 27	1	x	\$75.00	-
Winter Camp: December 28	1	x	\$75.00	
Winter Camp: December 29	1	x	\$75.00	
Winter Camp: January 2	1	x	\$75.00	
Winter Camp: January 3	1	x	\$75.00	
Winter Camp: January 4	1	x	\$75.00	
Winter Camp: January 5	1	x	\$75.00	
# of extended before/after care days:		x	\$10.00	
# of sessions helmet rental:		x	\$10.00	
Subtotal				
HST (#872224621) 13%:				
Total:				

I, the undersigned, do hereby grant permission to Pickering Horse Centre Ltd. to use the image of my child, _____ to be used in print, digital & social media. I do understand that the child's last name will not be used in conjunction with any of the images.

Parent/Guardian Signature

Office Use Only	
Paid: <input type="checkbox"/> Cash <input type="checkbox"/> Chq #: <input type="checkbox"/>	
Credit/Interact	
Received by:	
Receipt issued:	