

2017 Summer Camp Registration Form

Please check off sessions you would like to attend

- Session #1 July 3 - 7
 Session #2 July 10 - July 14
 *Session #3 July 17 - July 20
 Session #4 July 24 - July 28
 Session #5 July 31 - Aug 4
 Session #6 Aug 7 - Aug 11
 Session #7 Aug 14 - Aug 18
 Session #8 Aug 21 - Aug 25
 Session #9 Aug 28 - Sept 1
 *Please note: **Session #3 is a four-day session.**

Cost: Five day sessions are offered at a cost of **\$375.00 + HST**. Four day session is offered at cost of **\$300.00 + HST**. Helmet rental is an additional **\$30.00** for the session. Campers that have their own helmet must have helmets that meet ASTM safety standards.

Early Bird Sign Up: Campers registering and paying prior to March 31st, 2017 will receive a 10% discount off of their session.

Multiple Session Sign Up: Campers registering for multiple summer camp sessions shall receive the additional sessions at a 10% discount. To qualify for the discounts a current payment for the full amount of all sessions must be submitted.

*Note: Campers can apply for the Early Bird OR the Multiple discount, not both.

Early Drop-off- 7:00-8:30 a.m. (add **\$15.00** per day) / **Late pick Up- 3:30-5:00p.m** (add **\$15.00** per day)

A current dated cheque, cash, credit card or Interact payment for the full amount, along with a completed registration form will secure a session. Each 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. In the event that a camp session is cancelled, by the registrant, for whatever reason, a \$50.00 office fee will be applied. Cancellation requests must be received a minimum of 15 days prior to the start of the session. No refund will be given after that date. 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

First Session Registration	1	x	\$375.00 (5 day) \$300.00 (4 day)	
(Registrations Prior to March 31, 2016)			Early bird discount. Deduct (10% off)	-
Subtotal first session with Early Bird discount (a):				
# of additional 5 day sessions (with 10% discount):		x	\$337.50	
# of additional 4 day sessions (with 10% discount):		x	\$270.00	
subtotal additional sessions (b):				
# of extended before care days:		x	\$15.00	
# of extended after care days:		x	\$15.00	
# of sessions helmet rental:		x	\$30.00	
Total extended care & helmet rental (c):				
Subtotal (a + b + c):				
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	
Pd: <input type="checkbox"/> Cash <input type="checkbox"/> Chq #:	
<input type="checkbox"/> Credit/Interact	
Received by:	
Receipt issued by:	