

2008 LAKE SHORE REGION SUMMER CAMP APPLICATION

Name _____

Address _____

Club Name _____ Current Age _____ PC Rating: _____

Do you anticipate a rating change before camp? If yes, specify: _____

Parent/Guardian Name and Contact Information:

Name: _____

Address: _____

Home Ph: _____ Work Ph: _____ Cell Ph: _____

Email address: _____
(please print)

I am willing to be a Camp Chaperone:

T (12-5) W (6:30-5:00) TR (6:30-5:00) F (6:30-2:00)

Name of Mount: _____ Age of Mount: _____

Are horse and rider combination experienced with riding in the open? _____

If no, please explain: _____

Name and Contact Information for Horse Owner, if other than rider:

Does Horse Have Any Special Medical Needs? (If yes, how will you accommodate them at camp?)

I have reviewed this application and agree that this horse/rider combination is appropriate and able to handle the Lake Shore Camp 2008 Experience for the camper's rating level. I understand that it is my responsibility to notify the Camp Organizer if a member DOES NOT obtain the anticipated rating specified above.

Signature of Club DC