**Classic Colors Farm**

**www.classiccolorsfarmllc.com**

Camp Enrollment Form

 770-401-7754

**Rider’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Camp Session(s): June weeks: 6-10, 20-24, 27-July 1**

 **July weeks: 11-15, 18-22**

**1st Choice\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2nd Choice\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**What experience, if any, does your rider have with horses? (lessons, camps, etc.)**

**Does your rider have any learning or physical disabilities that we should know about to be able to provide the best experience possible? Any allergies? etc.**

**Rider’s parents’ names:**

**Daytime telephone number/emergency contact #s & email (camp info/reminders will be emailed the weekend before your camp):**

**Please enclose deposit payment for the week(s) of camp your child will be participating in along with one signed release of liability form. Deposit is $100/wk. You may drop it off, email it or mail it to 1030 Roper Rd. Canton, GA 30115.**

**Note—Camp hours are from 9:00am to 2:00pm, no extended hours care available. For more info. or any questions, call** Courtney Broka **770-401-7754 www.classiccolorsfarmllc.com**