

Horse Camp Application  
2008 Wakefield, VA

Name: \_\_\_\_\_  
(Circle name you wish to be called)

Sex: M F

Complete Mailing Address: \_\_\_\_\_

\_\_\_\_\_ Zip: \_\_\_\_\_

Email address: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Birth date: \_\_\_\_\_ Age: \_\_\_\_\_

Shirt Size (Adult) \_\_\_\_\_ 4-H Club: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

What Discipline do wish to ride:  Western  Hunter  Speed  Dressage

Skill Level: Parent must initial appropriate line.

\_\_\_\_\_ On the Flat \_\_\_\_\_ Jump to 18 Inches \_\_\_\_\_ Jump to 2'6"

Parent must initial if child and horse are experienced enough to go on trail ride and has permission to go on a trail ride \_\_\_\_\_

Parent must initial rider's skill level.

\_\_\_\_\_ Beginner \_\_\_\_\_ Intermediate \_\_\_\_\_ Advanced

We will attempt to put you with the people listed below:

List the names of the persons you want to room with:

\_\_\_\_\_

List the names of the person you want to stable with:

\_\_\_\_\_

*Virginia Cooperative Extension Service Programs, activities and employment opportunities are available to all people regardless of race, color, religion, sex, age, national origin, handicap or political affiliation.*