

SUMMER CAMP REGISTRATION

Name _____

Address _____

Telephone

Cell _____ Home _____

Emergency _____

Age _____

Height _____ Weight _____

Level of riding _____

Disabilities _____

Camp dates : please circle one or more dates for selected camp/camps

June 10-14

June 24-28

July 8-12

July 22-26

Mail registration with non-refundable check (unless we fill your spot) for \$125.00 for each camp

to: Lake St Louis Stables 1253 N Henke Rd Lake St Louis , Mo. 63367

Checks made payable to Lake St Louis Stables

Parent (or contact person) _____ Phone _____