

SUMMER CAMP REGISTRATION

Name (child) _____

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 7-11

June 21-25

July 12-16

July 26-30

Mail registration with non-refundable check (unless we fill your spot) for \$150.00 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 _____