

# PADDINGTON STATION

## Vacation/Horse Camp Booking Form

Camper \_\_\_\_\_ M or F (Circle One) Date of Birth \_\_\_\_\_

**Level of Experience: (Circle One)**

A: None      B: No English      C: Novice      D: Intermediate      E: Dressage & Jumping

Age (July 1, 2010) \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Business Phone: (\_\_\_\_) \_\_\_\_\_

Best Time to Call: \_\_\_\_\_

**Desired Camp Date:** \_\_\_\_\_

Any Special Request \_\_\_\_\_

Special Diets Available upon request.

If a riding hat is needed (please check) \_\_\_\_\_

**Children Camp** (17 years or younger) \$1005.00 per week \_\_\_\_\_

**Adult Camp** \$1005.00 per week \_\_\_\_\_

**Weekend Camps** \$310. \_\_\_\_\_

**Day Camps** \$375. \_\_\_\_\_

Registration fee of \$150.00 (Non refundable 45 days before camp) per camper must accompany this application. One half of the balance is due by April 1, 2010. The remaining balance must be paid in full 10 days prior to camp date. Other payment arrangements can be made upon application. Late registrations must pay in full on date of registration. Refunds will be made only for cancellations of registration received 45 days prior to camp date. This registration becomes effective upon receipt and acceptance of the deposit. Your failure to comply with the terms of this contract will subject you to cancellation. Realizing that the orderly operations of the camp is of the utmost importance, we agree to comply with all rules and regulations with regard to enrollment and withdrawal of campers, camp programs and all visitation at camp. We fully understand the camp reserves the right to cancel any camper enrollment. If the camper's physical or mental conditions, as disclosed by personal questionnaire, medical or dental certificate or otherwise is deemed unsatisfactory. In such cases the amount of the unused portion of the camp fee less the deposit will be refunded. No refund however will be made on a voluntary withdrawal. Your medical and liability waiver is to be completed upon arrival at camp.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**\*For Information on other available dates, please call 707.743.2541**