Gidd	• •	ault Ste	Riding Co Marie H 647 Old G Marie, ON	<b>amps –</b> Horse and Farden Rive	2024 R d Pony C er Road	lub Inc.	tion For	'n
Camper Nam	ne(s):							
Age:		Sex: M or F	Email:					
Address:						Postal (	Code:	
Cell Phone:_	Home Phone:							
Parent or Gu	ardian:							
Alternative C								
Medical Con								
			the appropri					
	Former (	Camper	Be	eginner	Less	son Program	n Rider	
Signatura			Adult Rider_	-		-		
_			_					
Date of Car	np (2 <sup>nd</sup> Ch	oice):				Fee:		
Camp	Fees	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7
Regular 9-4	\$525	July 1-5	July 8-12			July 29- Aug 2		Aug 12-16
Regular	\$425						Aug 6-9	
4 day Tykes 8:30-12	\$325			July 15-19				
or 1-4:30 Show 9-4	\$525				July 22-26			

## **Registration Details**

- Registration forms can be submitted any time and spots will be filled on a "first come, first served" basis.
- A signed Waiver must be included with the registration. The waiver can be found on our website @ www.ssmhpc.com or are available in the Club House
- E-transfer to ssmhpc@gmail.com & Registration Forms must be submitted together to secure a spot. Please include the campers name and camp date in the memo line.
- Payment sent without Registration forms will not guarantee a spot.
- Registration forms including Waiver can be emailed or dropped off in the mailbox labelled "Summer Camp" in the Club House.
- Cancellations prior to June 1st will receive a refund. You will be charged a \$50 admin fee.

Photo and Video Consent:

By signing below you are consenting to the taking of photographs and/or video recordings of the above mentioned camper by SSMHPC. You are assigning to SSMHPC, and waiving any rights you have related to, any such photographs and/ or video recordings, in whole or part, by SSMHPC.

I have read and understand the Photo and Video Consent: (Please Initial)\_\_\_\_

	For Office Use Only
Name :	
E-transfer Email :	
Date Received :	
Date Notified :	