

KAMP A-KOM-PLISH REGISTRATION FORM

2009-2010 Equestrian Programs

Melwood Recreation Center
9035 Ironsides Road, Nanjemoy, Maryland 20662
Phone 301-870-3226 • Fax 301-870-2620

I. RIDER INFORMATION

Name _____ Nickname (if any) _____

Mailing Address _____ County _____
(city, state, zip code)

Height _____ Weight _____ Sex Male Female Date of Birth _____

School Name (if Applicable) _____ Grade (In Fall) _____

Has the rider had previous riding lessons? Yes No If yes, name of facility _____

Approximate Level ? Walk Trot Canter Length of instruction _____

Best Method of Contact for Same-Day Cancellations: Phone: _____ E-Mail: _____

Does Rider require any additional supports or have any special needs? Yes No

If yes, please list _____

If a rider needs additional supports or has any special needs; a Skills Analysis will be sent out prior to confirming registration.

II. LEGAL GUARDIAN INFORMATION

Legal Guardian _____ Day Phone _____

Address _____ County _____

Night Phone _____ Cell Phone _____ E-mail _____

III. Emergency Contact –Must be completed by ALL RIDERS

Please note: You MUST provide two emergency contacts

If Rider is under 18, these Contacts must be available to pick up your child in case of an emergency.

1. Name _____ Day Phone _____

Night Phone _____ Cell Phone _____ E-mail _____

2. Name _____ Day Phone _____

Night Phone _____ Cell Phone _____ E-mail _____

IV. PROGRAM INFORMATION/REGISTRATION

To help us keep our cost down by spending our advertising dollars wisely, please check how you heard about Kamp A-Kom-Plish:

- | | |
|---|---|
| <input type="checkbox"/> Returning Camper | <input type="checkbox"/> Returning Equestrian Participant |
| <input type="checkbox"/> Friend | <input type="checkbox"/> Internet |
| <input type="checkbox"/> Daily Record | <input type="checkbox"/> Other: _____ |

