

Wonderland Farm Camper Information/Registration Sheet 2010

7453 Radio Rd NE, Leland, NC 28451

Phone 910-655-5735 Fax 910-655-0362 www.wonderlandfarm.net

Name of Camper(s) _____ Date of Birth _____
 Address _____ Age(s) _____
 City _____ State _____ Zip Code _____ Home Phone _____
 E-mail address _____
 Mother _____
 Work # _____ Home # _____ Mobile # _____
 Father _____
 Work # _____ Home # _____ Mobile # _____
 In Case of Emergency, Notify _____
 Phone # _____ Relation _____
 Doctor _____ Phone # _____
 Special concerns IE. allergies, etc. _____

Please Initial next to each line. The following safety rules apply.

- _____ Shoes with a 1/2" heel are required and must be worn while riding. (This is for safety! No Exceptions. Shoes without a heel can get caught in the stirrups.)
- _____ Safety helmets must be worn while riding and are provided. No sandals or flip flops to be worn while working around barn or horses.
- _____ Long pants are to be worn while riding (legs can get pinched by the saddle leathers). Shorts may be brought to change into for the afternoon activities.
- _____ Campers must bring lunch and a refillable water bottle to have on hand while participating in activities.

1. Complete information above
2. Check off each week your child will be attending in the boxes provided.
3. Circle your registration dates and prices.
4. Fill in # of weeks attending and subtotal.
5. Complete the optional transportation and late pick-up service sections.
6. Fill out multiple week discount section.
7. Total all lines in the total amount due section.
8. Complete method of payment. Enclose payment if check.
9. Complete Liability waiver on reverse side
10. Both the registration form and liability release form must be completed & turned in with payment.
11. Mailed registrations must be postmarked by discount date to receive discount.

Payment is due at time of Registration to hold a space in the camp.
Cancellations will be subject to a 100.00 Administration fee.
No Refunds after May 25, 2010.

Please tell us how you hear about us: Camp Expo _____, Advertisement _____, Sign _____, Friend _____, Online _____, Yellow Pages _____, Other _____

<p style="text-align: center;">Horseback Riding Camp</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"><input type="checkbox"/> Week 1 June 14- 18</td> <td style="width: 50%; border: none;"><input type="checkbox"/> Week 4 July 5- 9</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Week 2 June 21 - 25</td> <td style="border: none;"><input type="checkbox"/> Week 5 July 12- 16</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Week 3 June 28- July 2</td> <td style="border: none;"><input type="checkbox"/> Week 6 July 19- 23</td> </tr> <tr> <td style="border: none;"></td> <td style="border: none;"><input type="checkbox"/> Week 7 July 26- 30</td> </tr> </table>	<input type="checkbox"/> Week 1 June 14- 18	<input type="checkbox"/> Week 4 July 5- 9	<input type="checkbox"/> Week 2 June 21 - 25	<input type="checkbox"/> Week 5 July 12- 16	<input type="checkbox"/> Week 3 June 28- July 2	<input type="checkbox"/> Week 6 July 19- 23		<input type="checkbox"/> Week 7 July 26- 30	Pay by	Pay by	Pay After	# of weeks	Subtotal
<input type="checkbox"/> Week 1 June 14- 18	<input type="checkbox"/> Week 4 July 5- 9												
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	<input type="checkbox"/> Week 7 July 26- 30												
	3/25	5/15	5/15	x _____	_____								
	Save	Save	\$295										
	\$50	\$30											
	\$245	\$275											
<input type="checkbox"/> Tiny Riders Camp June 14-18 (Ages 4 & 5 only) 8:30-12:00	Pay by	Pay by	Pay After		Subtotal								
	3/25	5/15	5/15		_____								
	\$185	\$195	\$200										
Transportation	\$40 per week per child <i>Not available for tiny riders</i>			# of weeks	Subtotal								
				x _____	_____								
Late Pick-up	<input type="checkbox"/> \$50 per Week <input type="checkbox"/> \$15 per Day			# of weeks/days	Subtotal								
				x _____	_____								
Multiple Week Discount Also applies to second Child Must be Sibling in immediate Family	Discount \$20 Subtract this amount from your Subtotal			Total # Weeks of Camp	Subtract								
				x _____	_____								
Total Amount Due	Total Each Row Here			Total: _____									
Method of Payment	<input type="checkbox"/> Check One <input type="checkbox"/> Check # _____ <input type="checkbox"/> MasterCard		<input type="checkbox"/> Cash <input type="checkbox"/> Visa		Card # _____ V-code ___ 3 Digits on Back of Card Exp. ___/___/___ Signature/Name on Card _____								