



## Royal Ridge Summer Day Camp 2019 Enrollment Form

**Email or Deliver Form To:**

Royal Ridge Equestrian Center  
15069 Sycamore Canyon Road  
Poway, CA 92064

[RoyalRidgeEquine@outlook.com](mailto:RoyalRidgeEquine@outlook.com)

Please Circle Camp Session for Enrollment: (10am-2pm)

**June 24-28   July 8-12   July 22-26   Aug 5-9**

**Camper Information:**

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Male \_\_\_\_ Female \_\_\_\_ Age (at time of camp session) \_\_\_\_

Does the child above have any known medical conditions or Allergies: Yes \_\_\_\_ No \_\_\_\_

(If you checked **Yes**, please attach a page listing the condition(s).)

**Parent/Guardian's Information:**

Mother's Name \_\_\_\_\_

Father's Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

Email (required) \_\_\_\_\_

**Emergency Contacts (other than names above):**

Name \_\_\_\_\_

Name \_\_\_\_\_

Phone# \_\_\_\_\_

Phone# \_\_\_\_\_

Relation \_\_\_\_\_

Relation \_\_\_\_\_



**Circle One: (How did you hear about us?)**

\*Website \*Flyer \*Friend/Family \*Google \*Yahoo \*SoCalEquine \*Craigslist

**Camp Fee Payment Options: (please check one)**

(  ) I will be paying in full today (\$350). Amount Paid \$\_\_\_\_\_

(  ) I am paying the non-refundable deposit today (\$150) and understand that the balance is due 2 weeks prior to the camp session. Failure to pay the balance on time may require you to select a different week or forfeit your spot in the camp (no refunds).

**Payment Type**

(  ) I have enclosed a check payable to **Royal Ridge Equestrian Center** Check # \_\_\_\_\_

(  ) I have enclosed cash

Please feel free and contact us with any questions you may have:  
Emily Richards (Camp Director) 858-449-4311

Website: [www.RoyalRidgeEquine.com](http://www.RoyalRidgeEquine.com)  
Email: [RoyalRidgeEquine@outlook.com](mailto:RoyalRidgeEquine@outlook.com)