**2019 Juckas Stables Camp Registration**

  Session # : \_\_\_\_\_\_\_ Cookout? Yes / No

Camper’s Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Alt # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_

E-Mail address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Camper’s age:\_\_\_\_\_\_\_\_\_ Camper’s Health? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child/camper have any allergies, medical or behavioral issues or food restrictions we should be aware of?\_\_\_\_\_\_\_\_\_ If yes, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Family Dr\_\_\_\_\_\_\_\_\_\_\_\_\_ Dr.’s Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Insurance Carrier: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ID #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Person to call if parent unavailable: ­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relation? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe your camper’s experiences with horses:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is your child/camper **most** looking forward to at camp? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you hear about J.S. Horse Camp? Please circle: Flyer Website Email Friend Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Can you make a suggestion on where to post info about camps or can you help post flyers next year? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is your child a return camper? \_\_\_\_\_\_\_ # years? \_\_\_\_\_\_ Are you signing up with a friend? No Yes - Name\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

**Horse Camp: M-F***Register before January 1st to receive a $25 discount*

July 15th -19th 7-14 years old 9:00-12:00am $300 Session 1 \_\_\_\_

July 22th-26th 7-14 years old 9:00-12:00am $300 Session 2 \_\_\_\_

July 29rd-Aug 2nd 7-14 Years old 9:00-12:00am $300 Session 3 \_\_\_\_

Aug 5th -Aug 9th 7-14 years old 9:00-12:00am $300 Session 4 \_\_\_\_

**Campfire Dinner Option:**

**Saturday, August 10th** 6:00 pm-9:00 am **$50 /** Camper *Register before January 1st to receive $5 discount*

![MC900336147[1]]() **Camp\_\_\_\_\_\_\_\_\_\_\_\_\_+ Campfire Dinner \_\_\_\_\_\_\_\_\_\_\_\_\_ Total Cost \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**To reserve your child’s place in camp:** Mail Registration and Payment to:

***Camp Questions? Email Pam at Pam Juckas, 4 Werner Ct, Novato, CA 94947***

***pjuckas@yahoo.com****or call 415-408-8376* ***(Make checks payable to “Juckas Stables”)***

Parent/Guardian Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #’s where Parent(s) can be reached during the day at camp: \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and phone number of person(s) dropping off and picking up child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List name of anyone we should **NOT** release your child to? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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