

Date Received: _____ Cookout, 7/31? Yes / No Campout, 8/31-9/1? Yes / No Session # _____

2021 Juckas Stables Camp Registration

845-361-1429



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 7-14 years old

- June 28 – July 2 (9:00-12:00) Session 1 _____
- July 5 – 9 (9:00 – 12:00) Session 2 _____
- July 12 – 16 (9:00 – 12:00) Session 3 _____
- July 19 – 23 (9:00 – 12:00) Session 4 _____
- July 26 – 30 (9:00 – 12:00) Session 5 _____
- Aug 2 – 6 (9:00 – 12:00) Session 6 _____
- Aug. 9 – 13 (9:00-12:00) Session 7 _____
- Aug. 16 – 20 (2:00 – 5:00) Session 8 _____
- Aug. 23 – 27 (2:00 – 5:00) Session 9 _____



Horse Camp Extra Options:

Camp Fire Dinner: Saturday, July 31st 7:00 - 9:00 pm \$60 _____

Camp Out Overnight: Tuesday, August 31st- Sept 1st 6:30pm - 9:30am \$150 _____

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? _____