

HORSEBACK RIDING REGISTRATION FORM

Name: _____ Session: _____

We ask that campers pre-register for riding so that we can coordinate the schedule prior to camp. Please indicate whether your son would like to take riding lessons while at camp.

Yes

No

If yes, please complete the form below.

Age: _____

Weight: _____

Have you ever ridden at High Rocks before? _____

If so, how many years? _____

Do you ride when you aren't at camp? _____

How often? _____

Where do you ride? _____

English ___ or Western ___

Can you - Walk _____ Trot _____ Post _____ Canter _____ Jump _____

Please return this form by May 15th