

2021 SUMMER CAMP REGISTRATION FORM

NASSAU EQUESTRIAN CENTER ("NEC")

62 Route 106 Jericho, NY 11753 (516) 342-1771

PLEASE EMAIL COMPLETED FORM TO: NECatOldMill@aol.com

***PLEASE MAIL DEPOSIT CHECK TO: 62 route 106 Jericho, New York, 11753**

Camper Name: _____ **Entering Grade:** _____
Last First MI (As of Sept 2021)

Address: _____
Street City Zip

Home Phone: _____ **Cell Phone:** _____

Email Address: _____

Health Insurance Company _____ **Policy #** _____

Doctor Name: _____ **Dr. Phone:** _____

Doctor Address: _____
Street City Zip

Emergency Contact (someone available during camp):

Name Relationship Phone #

Name Relationship Phone #

Special Needs: _____

Allergies: _____

I give my permission for my child to attend and participate in Nassau Equestrian Center's Summer Camp Program for the following weeks. The cost is \$650 per week. Please check the weeks you would like you child to attend:

Check Sessions Desired

- ___ Jul 12 - 16
- ___ Jul 19 - 23
- ___ Jul 26 - 30
- ___ Aug 2 - 6
- ___ Aug 9 - 13
- ___ Aug 16 - 20

I understand that my child must have an ATSM riding helmet, riding boots (or appropriate footwear with a heel), and a pair of full length pants or riding britches in order for them to be able to participate in the horseback riding lesson. By signing this agreement I agree to pay the tuition for each week my child attends. There will be a **non-refundable one week deposit** of \$650 due upon signing of this registration form to secure a spot for my child balance is due first week child attends camp. I have completed and signed a separate riding agreement that describes the possibility of serious injury which may result from your child's participation in this summer camp program and that Nassau Equestrian Center does not guarantee you child's safety.

Parent Signature

Date