

BIG RIVER RANCH LOCATION REGISTRATION FORM

CHILD'S INFORMATION

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|--|--|
| CAMPER'S NAME: | MALE <input type="checkbox"/> FEMALE <input type="checkbox"/> |
| STREET ADDRESS: | DATE OF BIRTH: |
| CITY/STATE/ZIP: | T-SHIRT SIZE: _____ CHILD <input type="checkbox"/> ADULT <input type="checkbox"/> |
| DIAGNOSES & MEDICAL CONDITIONS (list medications): | |

PARENT OR GUARDIAN INFORMATION

| | |
|--|---|
| MOTHER'S NAME | FATHER'S NAME |
| ADDRESS: IF DIFFERENT FROM CHILD LIST BELOW | ADDRESS: IF DIFFERENT FROM CHILD LIST BELOW |
| STREET ADDRESS: | STREET ADDRESS: |
| CITY/STATE/ZIP | CITY/STATE/ZIP |
| HOME PHONE: | HOME PHONE: |
| WORK PHONE: | WORK PHONE: |
| CELL PHONE: | CELL PHONE: |
| EMAIL ADDRESS: | EMAIL ADDRESS: |
| MAIN CONTACT PERSON | |
| <input type="checkbox"/> MOTHER <input type="checkbox"/> FATHER <input type="checkbox"/> EITHER | |
| Best way to get a hold of main contact? <input type="checkbox"/> HM <input type="checkbox"/> WK PHONE <input type="checkbox"/> CELL <input type="checkbox"/> EMAIL | |

SESSION INFORMATION

PLEASE CHECK THE SESSION(S) IN WHICH YOU WANT TO REGISTER YOUR CHILD: June 15-19 July 6-10

After May 1: Full payment of \$450.00 due one week prior to your scheduled camp week; \$250.00 deposit upon registration.
Early Bird option: Registration is **\$375.00** if *paid in full* before May 1; \$250.00 deposit at the time of registration.

Please hold my son's/daughter's slot! I'm including;

a check or money order for the full amount or
 a deposit check or money order for \$250.00

REGISTRATION

Register by completing this form and sending to:
H.O.R.S.E. Camp Round-Up! 19021 Long Grove Rd. Higginsville, MO 64037