

# ROLLING HILLS FARM AND EQUINE, LLC.

386 TAIGA LANE, CAPE GIRARDEAU, MISSOURI 63701

## YOUTH CAMP AGREEMENT

Must be 8 years or older to participate

Participant's name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

\_\_\_\_\_  
Address City State Zip Code

Known allergies: \_\_\_\_\_

Restrictions: \_\_\_\_\_

Camp Date(s): \_\_\_\_\_

Parent or Legal Guardian: \_\_\_\_\_

(Print name)

\_\_\_\_\_  
Address City State Zip Code

Home Telephone \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### Emergency Contact: (If Parent or guardian cannot be reached)

\_\_\_\_\_  
Name Telephone

Email address: \_\_\_\_\_

\_\_\_\_\_  
Parent or legal guardian signature Date

Payment History						