

## 2025 Summer Camp Registration Form

WEEK 1: June 10 - 13 WEEK 5: July 15 -18

WEEK 2: June 17 – 20 WEEK 6: July 22 - 25

WEEK 3: June 24 - 27 WEEK 7: July 29 – Aug 1

WEEK 4: July 8 - 11 WEEK 8: Aug 5 - 8

## Please circle the session(s) you are registering for above.

Participant's Name:					
Address:					
City:				Zip:	
Age:	Height:		Weight: _		
Parent(s) Name:					
Phone 1:		Phone 2:			
Email:					
Emergency Contact:					

The fee for camp is \$600 per week and payment in full is required to hold your spot. Payment is refundable up to 60 days before the session starts. If you need to cancel within 60 days of your session start date, we will refund you only if we are able to fill your spot.

Each child must wear a shoe with a low, square heel and heavy pants. **Each rider must provide their own ASTM/SEI approved riding helmet**. Each day, campers should bring a healthy snack, a lunch, and two bottles of water.

**PLEASE NOTE:** Camp runs <u>Tuesday</u> through <u>Friday</u>, from 9:30 am until 3:00 pm. Please drop off your child between 9:15 am and 9:30 am and pick him/her up between 3:00 pm and 3:15 pm.



## **Camper Information Sheet**

1.	Camper Name:
2.	Does he/she have any previous riding experience?
	If yes, please describe:
3.	Is English your child's first language? Yes/No a. If not, what is? b. What is his/her previous experience speaking English?
4.	Please list any and all medications your child takes daily.
5.	Please list and describe the severity of any and all allergies or dietary restrictions your child has.
6.	Does your child have any learning differences or physical impairments? Yes/No a. If yes, please specify b. Is there anything specific we should know about interacting with your child with regard to this?
7.	Are there any anxiety or mood disorders and/or traumatic experiences that might affect your child during camp activities? Yes/No a. If yes, please specify b. Is there anything specific we should know about interacting with your child with regard to this?
8.	Has your child ever participated in a hippotherapy or therapeutic riding program? Yes / No a. If so, where? b. For how long? How long ago?
9.	Is there anything else that we should know about teaching or working with your child? If your child has had previous struggles with language, physical activities, social relationships, anxiety, etc., telling us about these struggles can help us understand him/her better and provide a more positive camp experience for everyone.
10	. Camper T-Shirt Size - children's sized: XS S M L XL



## **Agreements Page**

(1) I give permission to Palladia Farm, LLC, to photograph my child, (nalso give permission to Palladia Farm, LLC, to use photographs of my child for promotional purposes, including the promotion of the	uding
but not limited to the Palladia Farm, LLC, website, newsletter, Summer Camp promotion, and other marke communication materials.	ting and
(2) As the legal parent and/or guardian of (name), I grant permission provide routine health care, administer prescribed medications, and seek emergency medical treatment for child in case of emergency. In the case of prescribed medication, I will attach a written letter of instruction this registration form.	
(3) I understand and agree to the equipment requirements at Palladia Farm camp. I understand and agree to drop off and pick up times. I understand and agree to the refund policy. I understand and agree that my chot be allowed to handle a horse until I have submitted a signed Liability Waiver. My registration will not considered complete until I submit the Summer Camp Registration Form, Camper Information Sheet, Agree Form, a hard copy of the Palladia Farm Liability Waiver signed by a parent or legal guardian (scanned copaccepted), and full payment of \$600 per camper per week.	nild will be ements
Signature:	
Name (print):	



In order to complete your camp registration, please mail the following items to Palladia Farm: **14314 Town Trail, Green Oaks, IL 60048**. You may also email registration forms to <a href="mailto:stephanie@palladiafarm.com">stephanie@palladiafarm.com</a> and <a href="mailto:put the check">put the check</a> and original hardcopy of the waiver in the mail.

Summer Camp Registration Form

**Camper Information Sheet** 

Agreements Page

Palladia Farm Liability Waiver, signed in blue or black pen by a parent or legal guardian (WE NEED ORIGINAL HARDCOPY ON FILE – SCANNED COPIES NOT ACCEPTED)

A \$600 check made payable to "Palladia Farm, LLC" for each week of camp that your child/children will be attending, or a Zelle Payment to: margaret@palladiafarm.com

If you have any questions about camp and would like to discuss them with us, please don't hesitate to reach out! The best way to reach us is to email <a href="mailto:stephanie@palladiafarm.com">stephanie@palladiafarm.com</a>, and we can either email you back or schedule a time to talk.

Thanks so much for your interest in Palladia Farm. We can't wait to meet you!