Horse Camp 2026 Registration Form

CBR Horse Training by Heather Roberson. Local: @ BLT Stables 21711 Waite Mill Rd. Granite Falls, WA

Phone: (360) 819-5860 Email: cbrmobiletrainer@yahoo.com Credit Balance Due Method of Payment: $800 for whole Camp duration with receipt Pay: Stripe through email or in person/Check/Money Order City, State, Zip, CBR Horse Training by Heather Roberson

HEALTH& LIABILITY RELEASE

Name _____ M / F Age _____Birthday _____Weight _____

Height _____ Date of last boosters: Tetanus _____ Polio _____ Is appendix removed?_____ Is camper subject to: Asthma _____ Hay Fever _____ Diabetes _____ Convulsions _____ Any allergic reactions to drugs, insects, plants, animals, foods, etc.,

list any applicable: _____

_____

Any specific health problems or diet restrictions?

_____

_____

_____

Is camper under psychiatric care? _____ If yes, please obtain doctor's signed permission to attend camp. Health insurance company & policy #

:_____ Emergency Release Statement: In case of emergency, I understand that every effort will be made to contact me. However, if I cannot be reached, I hereby give permission to the physician selected by CBR Horse Training by Heather Roberson to hospitalize, secure proper treatment for, and to order injection, anesthesia, or surgery, for my child named above. Unless I attach signed and dated instructions otherwise, by signing below I grant CBR Horse Training by Heather Roberson the right to use pictures taken of my child in their future brochures and advertisements. I, therefore, sign my signature: Parent/Legal Guardian: _____Date: _____

Summer Day Horse Camp: $800 Minimum Non-Refundable Deposite for whole duration of camp or $200 per week for any week Camp is open.

Name—Camper (one per form) Address To process your registration, this form must be completed for every camper: Feel free to make copies. Gender: _____ (name & date): Phone Relationship Day Phone Relationship Name Day Phone: Emergency Contacts:

EMERGENCY CONTACT: _____

PHONE NUMBER_____ RELATIONSHIP: _____

SIGNER_____ STATEMENT OF_____

EMERGENCY CONTACT: _____

PHONE NUMBER_____RELATIONSHIP: _____

SIGNER_____ STATEMENT OF_____

EMERGENCY CONTACT: _____

PHONE NUMBER_____RELATIONSHIP: _____

SIGNER_____ STATEMENT OF_____

Summer Day Horse Camp: $800 for one month Minimum Non-Refundable Deposit

Due the Last week of July

If you would like to do just one week at

Time you must pay a week a head of that week a non-refundable payment of $200. Per camper per week.

It's for supplies.