

SUNNYMIST FARM, 18625 Main Road,
Mattituck, NY 11952
www.sunnymistfarm.com
e-mail: sunnymistfarm@yahoo.com
Tel: 631-905-6396



Children's Program Administrator: Joanne:
Cell: 631-848-9852

SPRING YOUTH RIDING PROGRAM REGISTRATION FORM
Program Dates: May 2 - June 22, 2018

Please complete this registration form and return with your full payment

Please make all checks out to Sunnymist Farm.

*Completed registration packets may be dropped off at the farm or mailed to:
Sunnymist Farm, PO Box 1244, Cutchogue, NY 11935*

Name of Child: _____ Age: _____ DOB: _____
Parent/Guardian Name: _____
Home Address: _____
e-mail: _____ Cell: _____ Home Phone: _____
Health Insurance Provider: _____ Tel: _____
Responsible Party: _____ Policy #: _____

- Choose a Day: WEDNESDAYS OR FRIDAYS
- Choose a Session (circle desired session/(s)): Session I: May 2-25 Session II: May 30-June 22

All sessions run from 4:30PM-6:00PM

Cost: \$160/session Amount Enclosed: _____

Discounts: Sibling discount: Save \$15/session on your second child.

1. How much riding experience does your child have? Please check all that apply:

- Never ridden a horse before
- Taken pony rides with assistance from a horse handler
- Attended Pony Camp—if yes, how many years: _____
- Taken private lessons—if yes, for how long? _____
- Ridden without assistance—if yes, indicate level: I am able to: walk / trot / canter / jump fences

2. Does your child have any allergies or other health conditions that we should be aware of? YES / NO

If YES, please describe below: _____

3. Emergency Contact Information (name/tel#):

NOTE: In the event of accident, illness, or medical emergency, we will administer first aid to your child and contact 911, if necessary. If we are unable to reach you, please provide two individuals to notify during camp hours:

1) _____
2) _____

4. May anyone other than the Parents/Guardians of the student rider pick up your child from class? If so, please list their names and contact information here:

1) _____
2) _____

5. May we include your child in photos which may be used for marketing purposes? We will not identify your child by name. YES / NO

Parent Signature

Today's Date