

Blue Moon Ranch

Summer Camp Horsemanship Registration Form



Location: 4605 CR 134, Wildwood, FL 34785/Phone: 352.578.4947

Mailing Address: 4841 NE 76 Way, Wildwood, FL 34785

Participant's Name _____

Please Print

Date of Birth _____ Age _____ School Grade in Fall _____

Participant's Address _____

Street City ZIP

E-Mail Address _____

Parent/Guardian _____

Home Phone (_____) _____

Work/Cell (_____) _____

Emergency Contact _____

Home Phone (_____) _____

Work/Cell (_____) _____

Office use only!

Deposit amount: _____

Check #: _____ Rec. # _____

Date: _____

Balance Due _____

Date Paid _____

Check #: _____ Rec. # _____

All balances are due 3 days prior to camp.

Choose a day camp session:

\$250/Week All Day—All balances are due three days prior to the beginning of the camp session

\$40/Half Day or \$200/Week for Half Day

All day advanced payment (one month prior to the beginning of the session) is \$225 for a full week and half day (pick-up time is noon) advanced payment is \$175 for a full week

You may choose more than one camp session; however, a \$50 deposit is needed for each week to hold your spot. Each participant must have completed the first grade.

_____ Session 1: June 4 – 8

_____ Session 5: July 2 – 6

_____ Session 2: June 11 – 15

_____ Session 6: July 16 – 20

_____ Session 3: June 18 – 22

_____ Session 7: July 23 – 27

_____ Session 4: June 25 – 29

Registration paperwork will also be handled online at kwildwood@aol.com or call D'Anne at 352-578-4947

We reserve the right to cancel part or a whole day due to dangerous weather (lightning, high wind, etc.)

Health History

Allergies: Please list all allergies, the type of reaction and its severity, treatment and date of last reaction. Include allergies to medications, food, bees, animals, plants, etc.

Allergy	Reaction/Severity	Treatment	Date of last reaction

Does your child suffer from **Anaphylaxis**? Yes _____ No _____

(Anaphylaxis is a severe allergic reaction marked by swelling of the throat or tongue, hives, and trouble breathing.)

Does your child carry an **EpiPen**? Yes _____ No _____/Does your child carry an **inhaler**? Yes _____ No _____

Medical Conditions: (include any precautions or restrictions on ranch activities)

Name of Condition	Effects

Medications: List any medications your child is currently taking, including dosage schedule and specific instructions for use. Medication that comes to the ranch must be in its original bottle or packaging.

Medication	Dosage Schedule	Specific Instructions

Does your child have a special medical or dietary regiment to be followed? Yes _____ No _____

If yes, please explain:

Any other information not covered in this form that is important for us to know:

My child has permission to engage in all prescribed activities, except as indicated above by me.

Signature of Parent/Guardian: _____ Date: _____

Drop off is 8:30 -9:00 a.m. for full and half day. Pick up is 4:00 – 4:30 pm. for full day and noon for half day. Please arrive no later than 4:30 p.m. for check out.

Please bring a Photo ID (driver's license) with you to pick up your child. To maintain safety of the participant, please list **ALL** persons allowed to pick up your child.

Authorization for Medical Treatment of Minors:

I give permission for my child to receive basic medical treatment from the Blue Moon Ranch Staff. In the event an emergency should arise, whereby my child should need medical attention or hospitalization, permission is granted to a representative of Blue Moon Ranch to grant authorization for necessary care. I understand that every effort will be made to contact me. In the event my child becomes ill and cannot continue with the week/day, I as parent/guardian do understand that a refund will not be given.

Signature of Parent/Guardian: _____ Date: _____

Photo/Audio/Video Release:

I being parent/guardian of _____ hereby consent that the photographs, audio, and video's for which he/she poses/speaks may be used by Blue Moon Ranch, its assigns or successors, in whatever way they may desire, including audio/video productions and television; furthermore, I hereby consent that such shall be their property, and they shall have the right to sell, duplicate, reproduce and make other uses of such as they may desire, free and clear of any claims whatsoever on my part.

Signature of Parent/Guardian: _____ Date: _____

Transportation Release:

I being parent/guardian of _____ hereby give permission to Blue Moon Ranch Staff to transport my son/daughter to and from different locations for activities and to participate in these activities.

Signature of Parent/Guardian: _____ Date: _____

Blue Moon Ranch

Summer Day Camp Horsemanship Registration Form



Location: 4605 CR 134, Wildwood, FL 34785

Mailing Address: 4841 NE 76 Way, Wildwood, FL 34785

Phone: 352.578.4947

Drop off is 8:30 -9:00 a.m. for full and half day. Pick up is 4:00 – 4:30 pm. for full day and noon for half day. Please arrive no later than 4:30 p.m. for check out.

Summer Day Camp Packing List

- Jeans/long pants to ride in
- Shorts to play in
- Extra set of clothes
- Closed toed shoes/boots to ride and play in
- Flip flops for beach, boat, and swimming
- Towel
- Sunscreen
- Bug spray (we keep first aid items, but NOT bug spray)
- **Lunch and personal snacks** (the ranch provides a snack in the afternoon, a cold drink, and cold water all day)
- **Personal water bottle with name on it**
- Personal helmet if you have your own
- Hat, sunglasses, and other personal items optional
- Cell phones, iPads, and other electronics are not allowed, They get in the way of our program and can get lost too easily. We have emergency numbers and your child can use our phone if there is an emergency.
- The ranch is not responsible for lost or stolen items