Camp Registration Information (filled out by youth) 2010

Your Name: _____ Age:_____

Have you worked with horses before? Y/N Please list the types of activities you have done with horses.

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What would you like to learn about horses while in camp?

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Do you have experience working with other types of animals? Yes/No Please list:

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Please fill out this form prior to the first day of camp. We look forward to meeting you.