

## CAMP REGISTRATION

Please print and complete this form along with the Liability Waiver and Emergency Contact/Medical Information forms and mail or submit with a \$100 non-refundable deposit for each week to:

Fellowship Farm  
4820 Thacker Dairy Road  
Greensboro, NC 27406

Pay with Cash, Check, Venmo or Zelle.

**Rider's Name**

**Known Allergies**

**Rider's Age**

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### **2025 Summer Camp Dates**

**Circle week(s) you are registering for:**

June 16th - June 20th

June 23rd - June 27th

July 14th - July 18th

July 21st - July 25th

\_\_\_\_\_ # of weeks x \$400      =      \$ \_\_\_\_\_

**TOTAL**      \$ \_\_\_\_\_