



Rider Profile

Name: _____ DOB: _____

Home Phone #: _____ Cell #: _____

Email: _____

Parent or Guardian Name: _____ Phone #: _____

Emergency Contact: _____ Phone #: _____

Medical Info: _____

Payment Info

Preferred Payment Method: Credit Card Cheque Cash

Would you like to: Pay Per or Pre Pay

Credit Card Authorization:

I _____, hereby authorize Maple Meadows to charge the following credit card.

Card Type: Visa MasterCard

Name as shown on card: _____

Credit Card #: _____ Expiration Date: _____

Signature

Date

Are you interesting in hearing about kids horse camps? Yes No

If yes, which school district does the future camp participant attend? _____