



POWER UP Horse Camp

Boys and Girls - Thursdays, 6:00-8:00 pm; (6 sessions)

- 7th - 9th grade (rising) - June 4 - July 9
- 4th - 6th grade (rising) - July 23 - August 27
- 1st - 3rd grade - September 10 - October 15

PARTICIPANT'S NAME: _____

AGE _____ Grade in Fall _____ Height _____ Weight _____ Girl _____ Boy _____

Guardian Name(s): _____

Email: _____

Street Address _____

City, _____ State, _____ Zip _____

Home Phone: (_____) _____ Cell Phone: (_____) _____

Emergency Contact Name and Phone: _____

Does child have an allergy or physical condition which we should be aware of? Y N If yes, explain:

Other concerns? Y N If yes, explain:

Photo Release: Parent/Guardian grants Safe Haven Ministries permission to take still and moving films of above named participant and authorizes Safe Haven Ministry to use and reproduce the photographs, and pictures to promote their ministry. Yes _____ No _____

Registrations may be sent to: Cheryl Schweizer, 18960 Dillie Rd., Edgerton, KS 66021 OR emailed to safehaven.kc@gmail.com. Screen shots are fine.

Guardian Signature _____