



COWGIRL CAMP REGISTRATION FORM

Riders Name: _____ Name of Horse: _____

Phone Number: _____ E-Mail Address: _____

DEPOSIT pd. _____ \$ _____

BALANCE OF CAMP (COST OF COWGIRL CAMP ENTRY \$350) \$ _____

STALL FOR FRIDAY \$25.00 \$ _____

ADDITIONAL STALLS \$25/STALL/NIGHT \$ _____

Primitive Camping \$15 not available before 3 on Friday \$ _____

ADDITIONAL MEALS FOR SAT. DINNER \$ _____

TOTAL \$ _____

MAKE CHECKS PAYABLE TO: LAURA WIENCEK

CREDIT CARD PAYMENT \$5.00 PROCESSING FEE

CARD# _____ EXP. DATE _____ CVC _____ ZIP CODE _____

***COURSE MANAGEMENT RESERVES THE RIGHT TO REFUSE ANYONE ENTRY ONTO PROPERTY.

ANY ADDITIONAL SERVICES REQUESTED OF CLINICIANS TO BE PAID DIRECTLY TO THEM.

TRAILERING IN WITH _____