



Application for After School Trail Riding 2010-2011

4300 CAMP CHESTNUT RIDGE ROAD • EFLAND, NORTH CAROLINA • 27243
(919) 304-3900 • (877) 568-6834 • FAX (919) 563-3559
KIM@CAMPCHESTNUTRIDGE.ORG • WWW.CAMPCHESTNUTRIDGE.ORG

Our mission is to glorify God by making visible the life-changing love of Jesus Christ through the practices of Christian hospitality, responsible care for the earth, and meaningful fellowship that strengthens and grows the Christian community.

Our trail riding program teaches the basics of good horsemanship, responsible care for horses and the environment, and an enjoyment of sport and the outdoors.

How to apply:

- Please check sessions that you wish to reserve.
- COMPLETE THE APPLICATION AND RETURN BY MAIL OR FAX. A \$30 NON-REFUNDABLE DEPOSIT IS DUE AT THE TIME OF REGISTRATION. STATEMENTS WILL BE ISSUED ON THE 1ST, ALL MONTHLY FEES ARE DUE ON OR BEFORE THE 15TH OF EACH MONTH.
- The confirmation will be sent to you via email (or snail mail if email is not available). Confirmations will include what to bring.

1st Rider's Name _____ Date Of Birth _____ Male Female

2nd Rider's Name _____ Date Of Birth _____ Male Female

3rd Rider's Name _____ Date Of Birth _____ Male Female

Rider's Address _____

City _____ State _____ Zip Code _____

Riding Level: Beginning Intermediate Advanced Number of years of experience: _____

of previous years for your family at Camp Chestnut Ridge _____

1st Rider's School _____ 10-11 School Grade _____

2nd Rider's School _____ 10-11 School Grade _____

3rd Rider's School _____ 10-11 School Grade _____

Father's Name _____ Mother's Name _____

With whom does camper live? _____ Home phone _____

Emergency contact _____ Father's business phone _____

Phone _____ Mother's business phone _____

Parent / Guardian Email address _____

Local Church _____

Would you like to receive our quarterly newsletter via email? Yes No

How did you hear about Camp Chestnut Ridge? _____

Do you have a camper with any special needs? Yes No (special needs can include diet, allergy, disabilities, disorders, etc. Please provide further information on the special needs information form included with your confirmation package)

Rider Covenant

1. I want to be a rider at Chestnut Ridge
2. I will do my best to live by all of the camp rules
3. I will do my best to make my time at camp a good experience for myself and my fellow campers
4. I understand that failure to live up to the above may result in my dismissal from camp

Camper's Signature _____

Parent or Guardian Covenant

1. In case of emergency, the Director has my permission to secure medical attention if unable to contact me immediately.

2. I agree that Camp Chestnut Ridge is released from liability in connection with medical treatment and unavoidable accidents.
3. I understand the risks involved in activities my child will choose or has already chosen. I accept all risks including those activities preliminary and subsequent to the chosen activities.
4. I give my permission for my child's picture to be used in Camp Chestnut Ridge promotional material.
5. The Camp Director reserves the right to decline the application of any child, or send home any child who, according to the Director's discretion, is not a desirable associate for the other campers, or puts themselves or others at risk.

Parent/guardian's signature _____





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Trail Riders – 1st - 8th grade			
↓ select	<i>List Name(s) of campers for each session below:</i>		
	Beginner group A		\$40.00
	Beginner group B		\$40.00
	Beginner group C		\$40.00
	Intermediate/Advanced		\$45.00
	Adult Beginner		\$40.00
	Recreational Riding A		\$30.00
	Recreational Riding B		\$30.00
	Recreational Riding C		\$30.00
	Recreational Riding D		\$30.00
	Recreational Riding E		\$30.00
	Private lesson		\$50.00
	Monthly Lease		\$200.00
	Multiple student discount		10%

FINANCIAL ARRANGEMENTS					
	Camps Selected	Cost per session		Number of Lessons Being Registered	Total Cost
			x		\$
	Transportation and after school care	\$10	x		\$
				TOTAL FOR ALL SESSIONS	\$
				Amount Paid	\$





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PAYMENTS may be made by credit card or by check or money order made payable to "Camp Chestnut Ridge"

Amount paid \$ _____ Check Number : _____
Visa / Mastercard number _____ Expiration date _____

Cardholder name and billing address _____

Cardholder signature _____

DONATIONS

Camp Chestnut Ridge operates on the simple premise that the very finest in program, facilities, and staff is a most effective witness to Jesus Christ in the world. Costs of operations are fully borne by Chestnut Ridge and the NC United Methodist Commission on Outdoor & Camping Ministries, Inc., with user fees reduced by assistance from donations generously given by individuals, families, corporations, and institutions who share the same value for excellence in camping ministries.

If you share this vision – that outdoor and camping ministries can be Christ-centered, high-energy, and of the best possible quality - then please consider donating of your time, talents, gifts, and service. In addition, Chestnut Ridge urges local churches and church organizations to partner with church youth who wish to attend camp and who face hardship in paying the full tuition.

Yes! I believe in the life-changing value of Christian outdoor and camping ministries, and I want to respond with a gift of:

_____ \$25 _____ \$50 _____ \$75 _____ \$100 _____ a week of camp _____ (other amount)

