



**Grey Dawn Stables Camp**

**Michelle Redding**

**201 SE 90<sup>th</sup> Street**

**Ocala, Florida 34480**

**(352) 427-9721**

**greydawnstables@aol.com**

**Camper Registration**

**Campers Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Parent or Guardian Name:** \_\_\_\_\_

**Campers Age:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Emergency Contacts:** \_\_\_\_\_  
**(Names and phone #)** \_\_\_\_\_

**Dates Camper Would Like To Attend:** \_\_\_\_\_

*Please include a \$100.00 deposit to secure your campers enrollment. This will be credited towards the camp package. Payment is due in full on the first morning of camp.*

**Any Additional Information about your camper that we should be made aware of:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Parent Signature**

\_\_\_\_\_  
**Date**