

RAC SADDLE CLUB CHILDREN'S CAMPS
APPLICATION FORM 2020

JUNIOR CAMP - 11 YRS & UNDER – Tuesday 21st – Friday 24th July

RESIDENTIAL £350 - HIRING CLUB PONY/HORSE
 £325 - OWN PONY/HORSE *(Please note this does include stabling and bedding, but not hay and hard feed)*
 £300 - BOVINGTON LIVERIES

NON-RESIDENTIAL £225 (Lunch is provided, but not breakfast or supper)

SENIOR CAMP - 12 YRS & OVER – Sunday 16th – Wednesday 19th August

RESIDENTIAL ONLY £350 - HIRING CLUB PONY/HORSE
 £325- OWN PONY/HORSE - *(Please note this does include stabling and bedding, but not hay and hard feed)*
 £300- BOVINGTON LIVERIES

PLEASE PRINT CLEARLY

Childs Name.....DOB.....

I wish to attend the 2020 Pony Club Camp on

Name of Parent/Guardian.....

Address.....

Telephone Nos: Day.....Evening.....

Email Address.....

In an emergency, if I cannot be contacted, the following person should be called:

Name.....

Address.....

Telephone No.....

Residential/Non-Residential *(Please circle Junior Camp only)*

I would like to bring my own pony YES / NO *(Please circle)*

If possible I would like to ride:.....

Does your child have any allergies or food intolerances.....

Is your child vegetarian, vegan, pescatarian?.....

Does your child have any other dietary requirements?.....

I can go on the rota to help with catering - YES/NO (please circle)

Approx timings for catering help - Breakfast – 7.30 – 9.30 Lunch - 11.45 – 1.45 Supper 5.30 – 7.30

Please tick days and times preferred:

Day..... BreakfastLunch.....Supper.....

Day..... Breakfast.....Lunch.....Supper.....

Day..... Breakfast.....Lunch.....Supper.....

Any medical conditions we need to know about YES/NO *(If yes, please speak direct to the office, in confidence.*

I have paid £.....by BACS TO Bank: Santander

Account Name: Royal Armoured Corps Saddle Club

Sort Code: 09 02 22

Account No: 10738386 on(date)

PLEASE PUT YOUR NAME AND CAMP IN THE REFERENCE.

I have paid £..... by card in the office on (date)

Sorry, no camp payments are to be added to bills

PLEASE HAND COMPLETED FORM INTO THE OFFICE,

ANY INCOMPLETE FORMS AND/OR FORMS WITHOUT PAYMENT WILL BE RETURNED.

YOUR PLACE IS NOT SECURE UNTIL FULL PAYMENT IS MADE

Signature of Parent/Guardian

.....

Name in Block Capitals

.....

Date

Please return to: Mrs Sue Cobb, RAC Saddle Club, Allenby Barracks, Bovington, Wareham, Dorset BH20 6JA