



## 2024 Camp Volunteer Form

<b>Information</b>	
Name:	Adult <input type="checkbox"/> Minor <input type="checkbox"/> Age of Minor:
Home Address:	
Parent/Guardian	AHC#
Home ph.:                      cell:	Email Address:
T-Shirt Size (please circle) Child S M L XL Adult S M L XL XXL	
Snack bags are provided, does your rider have allergies we need to be aware of?	
Emergency Contact Information	
Name:	Phone:
Alternate Emergency Contact	
Name:	Phone:
Are there any health considerations we should be aware of?	
Horse experience	

Camp(s) you wish to help in please initial or check below.

July 2-4*                      _____	July 29-Aug 1***                      _____
July 8-12**                      _____	Aug 12-16**                      _____
July 15-19**                      _____	Aug 19-23**                      _____
July 22-25***                      _____	

\* = FULL day 9am to 4pm, \*\*=ET/CC Camp 9am to 2pm \*\*\*=Reg ½ day 9am to noon

**HELMETS:**

Helmets are MANDATORY for all volunteers participating in Thursday thank you riding. This ride is WEATHER permitting please ask about our extreme weather policy.

**Waivers:**

If DH does NOT have a valid waiver on file (signed within the last 12 months) we will need a new one signed PRIOR to volunteering/riding at camps.

I/we \_\_\_\_\_ accept the above on behalf of myself or my child \_\_\_\_\_

Signature of participant or guardian: \_\_\_\_\_ Date: \_\_\_\_\_