



Kelly Maddox Training, Inc. **Riding Summer Camp Questionnaire**

Rider Information

Last Name:

First Name:

Age:

Any Special Needs (Including Allergies):

Riding Experience:

Parents/Guardians

Name:

Phone#:

Email Address:

Which week(s) would you like to attend?

Will you be using your horse/pony or ours?

How did you hear about us?

We look forward to seeing you at camp!!!