



Circle R Ranch

A Horse Lover's Favorite Camp

2024 SUMMER CAMP REGISTRATION

Once completed, please return/mail to Circle R Ranch

Address: 32549 State Hwy 27 Long Prairie, MN

Email: circle.r.ranch@icloud.com

Camp Line: 320-533-0322

For Office Use Only:

Date Rcv'd: _____

Check #: _____

CC: _____ MO: _____

Cash: _____

Amount: _____

CAMPER INFORMATION

Camper Name: _____

Date of Birth: _____ Height: _____

Weight: _____ Gender: Male _____ Female _____ Age: _____

Address: _____

City: _____ State: _____ Zip: _____

E-MailAddress: _____

PARENT INFORMATION

Parent/Guardian 1: _____

Address: _____ Ci

ty: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Parent/Guardian 2: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

EMERGENCY CONTACT INFORMATION

Name: _____

Home Phone: _____ Cell Phone: _____

2024 SESSION DATES AND COSTS

First session registration is \$950. (Excluding Mother/Daughter Week)

You will receive a 10% discount for each additional session you register for. Please call the camp line or visit us on Facebook for additional information and specials. Check the box next to chosen session

Girl's Only: June 2 - 8	Teen Week: June 30 - July 6 (11-17 years old)	Girl's Only: July 28 - Aug 3
Girl's Only: June 9 - 15	Co-ed: July 7 - 13	Girl's Only: Aug 4 - 10
Girl's Only: June 16 - 22	Girls Only: July 14 - 20	Girl's Only: Aug 11th - 17
Girl's Only: June 23 - 29	Girl's Only: July 21 - 27	Mother & Daughter: Aug 18 - 24 (\$850/Person)

PAYMENT INFORMATION

We accept payments by check, credit card, cash, or money order. Your non-refundable deposit of \$150.00 per person/per week is due with this registration form and unless specials or discounts state otherwise, your remaining balance is due no later than the day of arrival.

Name on Credit Card: _____ **Amount:** _____

Credit Card: Visa _____ MasterCard _____

Account Number: _____ - _____ - _____ - _____ Expiration Date: _____/_____/_____ CVS Code: _____
Month Year

Signature: _____
Cardholder agrees to pay to issuer total charges per the agreement between the cardholder and the issuer

Billing Name: _____

Billing Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Checks should be made out to Circle R Ranch. Please write your child's name on the memo line of your check.

OTHER INFORMATION

How did you find out about Circle R Ranch? _____

have been away from home: Never: _____ A couple of times: _____ Often: _____

Level of riding experience: None: _____ Some (1x-15x): _____ Intermediate 15x-30x): _____ Advanced (30+ times): _____

If you have been to Circle R Ranch before, what horse did you ride your last week of camp? _____

Please provide any additional information or comments here: _____

Cabin Mate Request: If there is a friend you would like to bunk with, write their name here. We will make every effort to place you in a dorm together if you are about the same age and gender. If one child is younger than the other they will be assigned a dorm that is age appropriate for the youngest child.

Name: _____ Age: _____

Important Information Upon Arrival:

Sunday Check-In and Registration is from 1:00 -3:00 p.m.

Please do not arrive before 1:00 or after 3:00 unless prior arrangements have been made.

Saturday Check-Out begins at 11:00 a.m. and The Horse Show will start at 12:30 p.m.

****** In the event of emergency, and we cannot be reached, we hereby give permission for our child to be taken to the Camp Doctor for whatever treatment necessary at the time. We hereby release the Circle R Ranch, Inc., to use pictures for promotional purposes.**

Signature: _____ **Date:** _____