

Redwood Ranch

Having fun riding horses.

2010 Riding Camp Dates

Sessions for Campers Ages 6-16

- 1.) June 14 thru June 18
- 2.) June 21 thru June 25
- 3.) June 28 thru July 2
- 4.) July 5 thru July 9
- 5.) July 12 thru July 16
- 6.) July 19 thru July 23
- 7.) July 26 thru July 30
- 8.) August 2 thru August 6
- 9.) August 9 thru August 13
- 10.) August 16 thru August 20
- 11.) August 23 thru August 27

Early Bird Discount:

10% off when paid in full by May 1st

Visa, Amex and MasterCard accepted

Questions? Feel free to call us at 510.531.0262

We have lessons and trail rides year round.

Redwood Ranch



Riding Camp 2010

5745 Redwood Road, Oakland, Ca. 94619

Phone: 510.531.0262 Fax: 510.531.0211

Email: info@redwoodranchstables.com

Website: www.redwoodranchstables.com

Redwood Ranch Summer Camp Program

We meet Monday thru Friday from 9:30 a.m. to 3:00 p.m. After care is available for an additional fee. The cost for one week of camp is \$525. A \$200 non-refundable registration fee is due for each week of camp scheduled to hold your child's place. The remaining \$325 balance is due at the start of camp.

Campers will have English riding lessons each day, along with horsemanship lessons—learning to saddle up, groom, and care for their horses plus time to run around.

Safety is important to the owners of the Ranch. Garry Pregler was a paramedic and is certified in CPR. Many of the Redwood Ranch boarders and camp counselors are also CPR certified.

Campers will need an ASTM/SEI certified helmet, boots with a 1/2" heel and pants without a thick inner leg seam. Bring lunch, an extra drink plus a bottle of water, a sweatshirt, a notebook and colored pencils, sunscreen and a hat, one change of clothes to have on hand, and a carrot for your horse.

Optional: Bring the USPC Pony Club D Manual found on Amazon.com

All campers are also required to have a release of liability signed by both parents by the start of camp. Releases are located in the Ranch office or on the website:
www.redwoodranchstables.com

Camper's Name: _____
Address: _____
Age: ____ Riding Experience: _____
Home Phone: _____ Work Phone: _____
E-Mail: _____

Emergency Information

Date of Last tetanus shot: _____
Preferred Doctor: _____
Doctor's Phone Number: _____
Insurance: _____
Do you give your consent for medical treatment in an emergency in the event that you cannot be reached? ___
Are there any health conditions of which we need to be aware of? _____
Allergies: _____

Name of Parent or Guardian _____

Signature of Parent or Guardian Date

Name of Parent or Guardian _____

Signature of Parent or Guardian Date

Sessions Requested: _____
Amount of Registration Enclosed: _____
10% Early Bird Discount Full Payment By May 1st:
___ yes ___ no