

# FOLLY FARM STABLES, LLC

75 Hartford Road  
Simsbury, CT. 06070  
(860) 658 - 9943  
(860) 658 - 7415 (fax)

## **2010 SUMMER PROGRAM REGISTRATION FORM**

Name (rider): \_\_\_\_\_ Age: \_\_\_\_\_

Name (parent): \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

How did you hear about our program? \_\_\_\_\_

Is there anything we should know about your child? (Allergies, etc) \_\_\_\_\_

Riding Level \_\_\_\_\_

Horse Lover's Program \_\_\_\_\_ Tiny Trotters \_\_\_\_\_ # of Weeks \_\_\_\_\_

Friday extended day \_\_\_\_\_

### **2010 SUMMER PROGRAM DATES:**

Week 1	June 14 – 18 (Horse Lover's only)	Week 2	June 21 - 25
Week 3	June 28 – July 2	Week 4	July 5 - 9
Week 5	July 12 - 16	Week 6	July 19 - 23
Week 7	July 26 - 30	Week 8	Aug. 2 - 6
Week 9	Aug 9 - 13	Week 10	Aug 16 - 20

First Week of Choice \_\_\_\_\_

Second Week of Choice \_\_\_\_\_

**Payment:** \$400 first week, \$350 additional weeks; \$40 for extended Friday

\$185 for Tiny Trotters

Check # or Card Type: Visa/MC \_\_\_\_\_ Total Amount \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name on Card \_\_\_\_\_

Signature \_\_\_\_\_

Billing Address (if different from above) \_\_\_\_\_

Full payment is due with the registration form. An office fee of \$25 will be assessed for changes made after confirmation notification.

A refund of 50% for withdrawals before June 14.

No refunds after June 15.