



Windcroft Stables

31 Windcroft Lane, PO Box 236, Madison, NH 03849

Phone: 774-722-5542

www.windcroftstables.com 31windcroft@gmail.com

Julie Shields, Owner & Operator

Camp 2025 Registration

Camper Name: _____ Age: _____ Height: _____ Weight: _____

Monday thru Friday 9a-2:30p for ages 8yrs and up.

Monday thru Friday 9:30a-12p for ages 5-7yrs.

Mornings will consist of learning horsemanship skills, playing with chickens and goats, chores, and a horseback riding lesson. This is a fun program that will accommodate many different children. Full day campers will choose afternoon activities as a group and may include bb guns, archery, Dianas bath, ice cream, baby goat visits, fort building, berry picking, Silver Lake, hiking, biking, arts and crafts, board games, volley ball, wiffle ball. Riding helmets are available to share with pony campers. If biking - camper will need to bring own bike and helmet and can be safely stored on property for the duration of camp.

All Pony campers, please wear riding pants or leggings or comfortable pants, boot with a heel to camp, rain/muck boots are helpful for chores. Dress appropriately for your time at camp. For full day campers bring a lunch, water bottle, a change of clothes, beach wear including a towel. For morning only campers, bring snacks and water bottle. Drop off will be up at the barn and pick up will be at the main house front porch.

Weeks Requested (weeks starting with Mondays):

Full Day Pony Camp – Monday-Friday 9a-230p - \$425/week – Please circle week(s) below. Ages 8yrs and up.

June 16th June 30th July 14th July 28th August 11th August 25th

Fees: _____

Morning Pony Camp – Monday-Friday 9:30a-12p - \$275/week – Please circle week(s) below. Ages 5-7yrs.

June 16th June 30th July 14th July 28th August 11th August 25th

Fees: _____

for those that apply by April 1st – campers will receive a free Windcroft Stables tshirt or a baseball cap!

Tshirt Size – **Youth** or **Adult** (please circle) **XS S M L XL** or **Baseball Cap** (circle) Registration Fee: \$25.00

50% due at Registration: _____ Balance due June 15th: _____ Total Fees: _____

***** Please attach completed Liability waiver with registration. *****

Special Needs Campers must complete 1 introductory lesson for evaluation and added fees may be incurred if child needs 1:1 at \$10/hr. Pony camp week availability is based on available ponies and appropriate helpers. Space in each session is limited to 4 full day campers plus 4 morning session campers. Cash, check, or Venmo (774-722-5542 @windcroft). All payments are non-refundable. Added hours may be available upon request and may incur added fees.

Parent/Guardian Signature: _____ Date: _____

Windcroft Stables

Permission to Transport, Pick Up, Water Safety, and Health Needs of Camper
**** All Campers ****

Full Day Campers Only

I _____ grant permission to Julie Shields to transport my child _____
(parent/guardian) (child's name)
to activities during pony camp such as – ice cream runs, beach, baby goat visits, etc.

Describe your child's swimming ability and would you like me to enforce any parental restrictions around water?
Typical enforced restrictions for our campers – for those that cannot tread water or come up for air without using their feet on the ground – must stay at “arm pit deep, flat feet” or wear a parent provided life jacket.

All Campers

My child has health conditions or Special Needs listed below with appropriate actions to take by Julie Shields:

I give Julie Shields permission to use her best judgement to give appropriate dose of benedryl (for allergic reactions including hives) and administer 1st aid care as needed _____ (parent/guardian initial).

All campers must behave in a kind, safe, and responsible way to participate at camp. Campers with behavior difficulties, will be guided to appropriate behavior. If campers are uncooperative and cannot conduct themselves appropriately or are disruptive or unkind, parents will be requested to pick camper up.

Special Requests if any:

Parent/Guardian Signature: _____ Date: _____

Printed Name: _____ Phone: _____

Address: _____ Email: _____

(Emergency Contacts other than above)

1st Emergency Contact Name: _____ Phone: _____

2nd Emergency Contact Name: _____ Phone: _____

Names of Adults that are OK to pick up my child: _____

Requested drop off Time: _____ Pick up Time: _____
if different than stated camp beginning and ending times