



ISLAND HILLS STABLE, LLC.

MAIL OR DELIVER COMPLETED APPLICATION TO:

ISLAND HILLS STABLE, LLC.* 26 ROCKY POINT RD.
MIDDLE ISLAND, NY 11953

(631) 924-4046

Child's Name _____

Age _____ Height _____ Weight _____ Grade _____

Parent's Name _____

Address _____

City _____ State _____ Zip _____

Phone: (H) _____ (W) _____ (C) _____

E-mail: _____

*Please include \$40 deposit for each session

2011
October 10th _____

November 8th _____

November 11th _____

November 25th _____

December 26th - 30st _____

2012
January 16th _____

February 20st - 24th _____

April 5th - 13th _____

May 28th _____

RIDING EXPERIENCE:

_____ None but eager to learn

_____ Current I.H.S Student

_____ Prior I.H.S Student

_____ Attended I.H.S Camp Before

_____ Attended Other Pony Camp

_____ Student at Other Stable

OFFICE USE ONLY

DATE	Ck. #	AMOUNT	BALANCE