



# Chamounix Summer Camp 2026 Registration Form

For ages 8-13. Camp Hours 9 AM to 4 PM Monday through Friday  
At 98 Chamounix Drive Phila PA 19131.

**CAMPER INFORMATION:**

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**PARENT/GUARDIAN INFORMATION:**

Parent/Guardian 1 Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Parent/Guardian 2 Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

**HEALTH INFORMATION:**

Camper Medications: \_\_\_\_\_

Camper allergies: \_\_\_\_\_

Describe any campers' special needs:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMERGENCY CONTACT:**

If parent/guardian cannot be reached, staff will call  
the person listed below:

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**GRANT CHAMOUNIX STABLES PERMISSION TO:**

Administer minor first-aid: \_\_\_\_\_ (guardian initials)

Take camper on trails: \_\_\_\_\_ (guardian initials)

**RIDING EXPERIENCE:**

Has your camper ridden before? Circle Y / N

If Y (yes), which of the following is/camper experienced with?:

Walk \_\_\_\_ Trot \_\_\_\_ Canter \_\_\_\_

Jump: Crossrails \_\_\_\_ Verticals \_\_\_\_

Does your camper know:

Trot Diagonals: Y / N

Canter Leads: Y / N

**Circle the week(s) you would like your camper to attend:**

Due to limited availability, you may only select up to 2 weeks.

Week 1: June 15 - 19

Week 2: June 22 - 26

Week 3: June 29 - July 3

Week 4: July 6 - 10

Week 5: July 13 - 17

Week 6: July 20 - 24

Week 7: July 27 - 31

Week 8: August 3 - 7

Polo Camp: August 10 - 14

**Camp Fee:** \$525 per week

**Polo Camp Fee (Age 10+):** \$275. A camper must know how to walk/trot and tack up independently.

**Early Registration Discount:** \$25 off the total amount due, if paid in full by March 15th, 2026.

**Sibling Discount:** \$25 off the total amount due when registering siblings.