



Zubrod Stables Camp Registration

CHILD NAME: _____

CHILD AGE: _____

PARENT/GUARDIAN NAMES: _____

Phone: _____ Address: _____

Which camp are you registering for:

June 29-July 1: _____

August 3-5: _____

Would you like to attend the alternate date should your first choice be full? YES NO

\$300

Balance Due: _____

Less \$50 deposit/week: _____

Balance Due at Check in: _____

Account Type: Visa MasterCard AMEX Discover

Cardholder Name _____

Account Number _____

Expiration Date _____

Total for Credit Card Deposit: \$51.75.

SIGNATURE _____

DATE _____

Please fill out and mail form and check payable to Zubrod Stables (or credit card info) to:

Zubrod Stables
ATTN: Summer Camp
P.O. Box 379
Prospect, KY 40059

For more information contact: Deveau Zubrod at dzubrod@gmail.com or call 859-421-6753.