

Glen Oro Farms For the "Mature Competitor"

EVENTING BOOT CAMP

Thursday - Sunday,

June 24 - 27 & August 19 - 22, 2010

Name: _____ Age: _____

Address: _____

City: _____ Prov: _____ Postal Code: _____

June 24 - June 27, 2010 Boot Camp

August 19 - 22, 2010 Boot Camp

OEF Number: _____ Owner of Horse: _____

Level of Rider: _____

Level of Horse: _____

Goals of Clinic: _____

Your Areas of Strength: _____

Your Areas of Weakness: _____



Deposit of \$250 required, balance due on first day of camp.

Mail to:

Leslie Saila,
2574 Oro Line 10 N, RR 2
Hawkestone, ON
L0L 1T0

To register, or for more information, please contact Leslie Saila at (705) 326-7244 or leslie@glenoro.com

www.GlenOro.com