



# Hideaway Horse Center

12301 Cross Road Trail  
Brandywine, MD 20613  
Phone: 301-782-3200

E-Mail: [hideawayhorsecenter@yahoo.com](mailto:hideawayhorsecenter@yahoo.com)  
Web: [www.hideawayhorsecenter.com](http://www.hideawayhorsecenter.com)

## Field Trip Contract

Name of Representative: \_\_\_\_\_

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

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

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

Number of Children in Attendance: \_\_\_\_\_

Date of Event: 1<sup>st</sup> Choice: \_\_\_\_\_ 2<sup>nd</sup> Choice: \_\_\_\_\_

Time of Event: 1<sup>st</sup> Choice: \_\_\_\_\_ 2<sup>nd</sup> Choice: \_\_\_\_\_

Special Notations: \_\_\_\_\_

A \$100 non-refundable security deposit must be sent with application. The remainder is due upon arrival of the event. If you have any questions, comments, or concerns, please contact Bridget Rice. Deposits can be paid online via our website or you can send a check made out to Hideaway Horse Center to 12301 Cross Road Trail, Brandywine, MD 20613.

Amount of Deposit Enclosed: \$ \_\_\_\_\_

Field Trip Representative:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### FOR OFFICE USE ONLY

Event Date: \_\_\_\_\_

Event Time: \_\_\_\_\_

Total Due: \_\_\_\_\_

Deposit Paid: \_\_\_\_\_

Remainder Due Day of: \_\_\_\_\_

Hideaway Horse Center Representative:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date