

Hideaway Horse Center

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

E-Mail: hideawayhorsecenter@yahoo.com Web: www.hideawayhorsecenter.com

Scout Contract

Name of Representative:				<u>—</u>
Address:				
Phone:				
Email:				
Troop Number:				
Type of Function (circle one):	Horse Fan Ba	dge	Horse Rider Badge	
Number of Children in Attendance:				
Date of Event: 1st Choice:		2 nd Choice: _		
Time of Event: 1st Choice:		2 nd Choice: _		
Special Notations:				
check made out to Hideaway Horse Center to Amount of Deposit Enclosed: \$ Troop Representative:		Road Trail, Bra	andywine, MD 20613.	
Signature		_	Date	
FOR OFFICE USE ONLY				
Event Date:	Eve	nt Time:		
Total Due:				
Deposit Paid:				
Remainder Due Day of:				
Hideaway Horse Center Representative:				
Signature		_	Date	