



# SPRING DOWN EQUESTRIAN CENTER

## GIRL SCOUT REGISTRATION FORM

Troop Number \_\_\_\_\_ Number of Riders \_\_\_\_\_  
( a minimum of 6 please)

How did you hear about us? \_\_\_\_\_

Name of Contact: \_\_\_\_\_

Address \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Date and Time Preferred \_\_\_\_\_

Please list 2 alternate dates and times \_\_\_\_\_

\_\_\_\_\_

Please send a 50% nonrefundable deposit to:

SDEC  
725 Portola Road  
Portola Valley, CA 94028

Amount of Deposit \_\_\_\_\_