


THE UNIVERSITY of TENNESSEE 

DEPARTMENT of ANIMAL SCIENCE

Youth Horse Judging Camp

August 2,3,4, 2009

Name: _____

Youth Participant or Chaperone (please circle one)

County or Chapter: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email Address: _____

Grade: _____ Age: _____ Sex: _____ Shirt Size: _____

**Room With: _____ Chaperone: _____

Any Special Services Needed? _____

Amount Enclosed: \$ _____

****Important note on housing: Two people per room; Each participant/chaperone is responsible for bringing own toiletries, towels, bedding and pillows.**

For more information, please contact Russell D. Kriewald at:

rkriewald@utk.edu or (865) 974-6390

Please make checks payable to:
The University of Tennessee

Department of Animal Science
ATTN: Horse Judging Camp
2640 Morgan Circle Drive
102 McCord Hall
Knoxville, TN 37996

<http://animalscience.ag.utk.edu>