



Achaicus Ranch

4592 E. 750 S.
Ladoga, IN 47954

Session Application

Children ages 8 – 18 may participate in sessions. Please list each of your children that wish to participate and submit application to the address above, or email to elisha@achaiusranch.org. We will contact you to schedule sessions as soon as possible. If you have any questions, please call Elisha McCulloh (765) 376-9535.

Parent/legal guardian name _____

Phone Number (____) _____ Email address _____

Address _____

Child's Name _____ DOB _____ Male Female

Does child have any physical or mental condition(s), which may affect his / her safety and ability to participate? **Yes** **No**

If "YES," how might we be able to help with their special needs?

Child's Name _____ DOB _____ Male Female

Does child have any physical or mental condition(s), which may affect his / her safety and ability to participate? **Yes** **No**

If "YES," how might we be able to help with their special needs?

Child's Name _____ DOB _____ Male Female

Does child have any physical or mental condition(s), which may affect his / her safety and ability to participate? **Yes** **No**

If "YES," how might we be able to help with their special needs?