

REGISTRATION FORM

Rider's name * _____

Rider's Age * _____

Legal Parent/Guardian * _____

Email Address * _____

Phone Number * _____

Work or Cell Number _____

Full Address

* _____

Emergency Contact * _____

Emergency Contact Phone Number * _____

First/Last Name(s) of People To Whom My Child May Be Released *

One first/last name per line. Please be prepared to show legal photo identification!

Select weekly session(s) your child will be attending *

- May 26th - May 29th
- June 1st - June 5th
- June 8th - June 12th
- June 15th - June 19th
- June 22nd - June 26th
- June 29th - July 3rd
- July 6th - July 10th

- July 13th - July 17th
- July 20th - July 24th
- July 27th - July 31st
- August 3rd - 7th

Please contact us to schedule single days at the daily rate.

I have understood that each rider also have to have the following on file: *

- Horse Rental Agreement and Liability Release Form
- Emergency Medical Authorization

All boxes need to be checked. Read more about these documents under "Information".

How did you hear about us? *

- Returning client
- Recommended by a friend
- Searching online
- Social Media
- Other

EMAIL OR TEXT THIS DOCUMENT TO US OR IT WILL NOT BE PROCESSED