



Student Information Form

Applicant Information

Student's Name: _____ Date: _____
Last First M.I.

If Minor:
Guardian's Name: _____
Last First M.I.

Guardian's Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Cell Phone: _____ Home Phone: _____

Work Phone: _____ Email _____

Student's Birthdate _____ Student's Height _____ Student's Weight _____

Student's Riding Goals

Check all activities that you are interested in for 2020:

- Private Riding Lessons
- Horsemanship Classes
- Basic Arena Riding
- Seasonal Horse Day Camp (during Fall, Winter, Spring, Summer Break)
- Horse Camping Trip – overnight camping trip with horses
- Basic Arena Riding
- Gymkhana/Barrel Racing
- Obstacle Challenge / Bomb Proofing
- Trail Trials
- Groundwork
- Working with More Challenging Horses with Less Training/ Bad Habits
- Leasing/Sponsoring a Horse
- Vaulting Classes
- Work as a Instructor/Trainer
- Other: _____

How often would you like to ride? _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. .

Signature: _____ Date: _____