

Name of Participant: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Phone Numbers: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Legal Guardians (if under 18): \_\_\_\_\_

Emergency Contact name and phone: \_\_\_\_\_

Prior Experience with Horses: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Why have you chosen to participate in horse activities?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are your goals and expectations?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Will you require the use of a lesson horse?**    YES \_\_\_\_\_    NO \_\_\_\_\_

If you need a school horse to ride for your lessons you **must** provide the following information:

Height: \_\_\_\_\_      Weight: \_\_\_\_\_      \*Experience Level: \_\_\_\_\_  
\*Beginner/Intermediate/Advanced/Other

Do you have injuries, disabilities, or special needs?    YES      NO

Explain:

\_\_\_\_\_  
\_\_\_\_\_