## WOODEDGE

## SPRING SEMESTER 2024 HORSEBACK RIDING LESSONS REGISTRATION FORM – ONE STUDENT PER FORM

STUDENT INFORMATION Name:		SCHEDULING PREFERENCES: How many lessons per week are you enrolling	PREVIOUS RIDING EXPERIENCE  Can you, with confidence, control, and without assistance:
Address:		in: Each additional lesson requires another	Walk Trot Canter Jump
City, ST ZIP:		tuition. Ride time choices:	
Phone Numbers (	123.456.7890):	DAY M T W T F S TIME	IF YOU ARE NEW TO WOODEDGE
Home:	Mom Work:	1st:	Have you had riding lessons before? Yes No
Cell:	Dad Work:	2nd:	If "yes" for how long (years/months)?
Email 1:		3rd:	Where did you ride?
Email 2:			How did you hear about Woodedge?
Height: Weig		I <u>cannot</u> ride on:	
Birthdate (mm/dd/	yyyy): Age:	Mon Tue Wed Thu Fri Sat	
ADDITIONAL I	INFORMATION:		
Even if you have o	given us this information before, PLEAS	SE complete the form to insure that our records remain c	eurrent. FOR OFFICE USE ONLY
Health problems,	allergies, or special needs:		M TU W TH F S @:am pm
Any Other Concer			<b>I A L</b>   Date
	ct Person (Name/Phone):		
Primary Physician			AmtBal Due
Additional Comme	ents (optional):		
WARNING UNEQUINE ANIMA  No suit shall recover damagoremises or off the student of this student of this	DER NEW JERSEY LAW, AN EQUAL ACTIVITIES RESULTING FROM be instituted by the student or thes or loss actually or allegedly retained the premises, either for instruction parents of a student at this scluits which shall be brought by an school.	Form – Spring Semester 2024 – SIGNATURE REGUESTRIAN AREA OPERATOR IS NOT LIABLE FOR THE INHERENT RISKS OF EQUINE ANIMAL Are parents or guardian of a student, jointly or seminated to parents of the student or to either of ion or in connection with instruction, such student or to save this school, or any owner or yone not signatory hereto and which shall be presented.	Stepson private lesson \$100 pay by the lesson semi-private lesson sposit (included with registration; \$500 balance due by April 30 posit (included with registration; \$500 balance due by April 30 posit (included with registration; \$500 balance due by April 30 posit (included with registration; \$500 balance due by April 30 position posi
			t's parents. Termination, however, shall not affect the
		(2), for any mishap which shall have previously	
Student's name		(2); for any initial winter shall have proviously	- Coouriou.
		ents of said student and wish my / his / her less	sons to begin on (mm/dd/www):
Signatures:	Adult Student:	site of oard ordination may ring ring ring	Date:
Jigilatales.	Father of Student:		Date:
	Mother of Student:		Date:
	Address:		Phone (123.456.7890):