

Epona's Grove 2015
Junior Riding Lesson Registration
(please print)

Student Name _____

Date of Birth _____ Home Phone w/area _____

Address w/zip _____

Mother's Name _____

Cell w/area _____

Father's Name _____

Cell w/ area _____

Emergency Contact (relation) _____

Cell w/area _____

Please answer these questions in order to select the best horse for you.

Height _____ Weight _____ Age _____

How many times have you gone horseback riding? _____

Did you ride by yourself or did someone lead you around? _____

Have you ever had riding lessons ? If yes, English or Western? _____

Did you ride at the walk? _____ Sitting or Rising Trot? _____

Canter (Lope)? _____ Jumped? _____

Groomed your horse? _____ Saddled? _____ Bridled? _____

What are your goals in taking lessons? _____

Any other information you would like your instructor to know?
