



**CONTINUING REGISTRATION FORM**

Cost: \$150.00 per session

**Summer 2018: Weekly June 4 – June 28**

**Please note that all paperwork must be received 1 week prior to the start of each session**

This form to be used if Participating Registration Form and Physicians Statement are dated after 6/4/2017

Please contact us regarding special Tuition Assistance for qualified riders. Persons seeking Tuition Assistance should complete a Tuition Assistance Form.

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

Indicate changes below:

E-Mail Address:	Home Phone:	Mobile Phone:
Address:	City:	State / Zip:
Emergency Contact::	Phone:	Phone:
Medical Conditions & Medications:		
Other :		
<input type="checkbox"/> There are no known changes to the participant's medical conditions, medications or contact information.		
Please reserve my space for this therapeutic riding session. My \$25 Deposit is included. SIGNATURE/ DATE:		