



3425 E. Morgan Road, Ann Arbor, MI 48108 734-677-0303

Form #1 Winter 2012 Session: Monday February 6 – Saturday March 17 (6 Weeks)
 Make up week (for classes cancelled due to bad weather): Monday March 19 – Saturday March 24

Deadline: Payment (\$150.00) MUST accompany form; Both due on or before January 14, 2012

Rider's Name: _____ **Date of Birth:** _____ **Current Weight:** _____

Parent(s) Name(s): _____

Home Phone #: _____
 (if Rider under age 18 or living at home)

Street Address: _____

Cell Phone #: _____

City, State: _____

Office Phone #: _____

E-mail

Address(es): _____

CIRCLE ALL TIMES that the Rider IS ABLE TO RIDE

Independent riders:

Check here and Jan will contact you with scheduling information _____

Mondays	Tuesdays	Wednesdays	Thursdays	Saturdays
	10:00-11:00a.m.			10:00-11:00a.m.
	11:00-12:00a.m.			11:00-12:00a.m.
				12:00-1:00p.m.
6:00-7:00p.m.	6:00-7:00p.m.	6:00-7:00p.m.	6:00-7:00p.m.	
7:00-8:00p.m.	7:00-8:00p.m.	7:00-8:00p.m.	7:00-8:00p.m.	
*8:00-9:00p.m.	*8:00-9:00p.m.	*8:00-9:00p.m.	*8:00-9:00p.m.	

* Note- 8pm classes will only be added if necessary.

This form and payment of \$350.00 is due by **March 10, 2012**

___ Additionally, I would like to make a donation of \$ _____ to
Therapeutic Riding, Inc.

Rider fees account for only 26% of our annual budget.

**FAILURE TO RETURN ALL PAPERWORK AND PAYMENT MAY RESULT
IN RIDER LOSING HIS/HER ACTIVE RIDER STATUS.**

___ Rider will ***NOT*** be participating in Winter 2012 Session and plans to enroll in the
Spring/Summer 2012 session.

___ Rider will no longer be riding at TRI.