

**September / October EquiClub - 2010**  
**Session Registration and Invoice**  
**Fieldstone Farm Therapeutic Riding Center**

To ensure proper credit, please return this registration along with payment.  
 A \$25.00 LATE FEE will be assessed on any late payment.

Student Name: \_\_\_\_\_ Instructor Name \_\_\_\_\_

Day	Tuition Rate	Sept./Oct. Class Dates	No Class Dates
Mondays	\$119.00	September 13, 20, 27. October 4, 11, 18, 25.	Sept 6 <sup>th</sup> .
		Class times are from 5:30 to 6:30	

**Parent/Student Reminders:**

- ❖ Parents and/or drivers are to walk students into the mounting/hat box area and wait with their student(s) until the Instructor is in the mounting/hat box area.
- ❖ Please enclose your full non-refundable lesson fee, payable to Fieldstone Farm TRC with your registration form to receive proper credit. You may mail payments to P.O. Box 23129, 16497 Snyder Rd. Chagrin Falls, Ohio 44023.
- ❖ Our lesson curriculum will include ground lessons designed to meet the needs of each student.
- ❖ If you need to discontinue your lesson participation, 3 weeks notice is required in an effort to keep our classes full.
- ❖ **Failure to keep your account in good standing, will result in lesson termination. Please help us continue to serve as many students as possible by making timely payments!**

**Please complete the following information to reflect any changes:**

\*\*Has this student experienced any changes in medical condition (i.e. surgery, medications, seizure history, behavioral patterns, etc.) and/or other aspects? No \_\_\_ Yes \_\_\_ (If yes, please explain) \_\_\_\_\_

Adult , Parent or Guardian Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone#: \_\_\_\_\_

Spouse, Other parent or Guardian Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone#: \_\_\_\_\_

**\*\*Email Address**

Please note any change in your address, home phone, business phone or emergency contacts. \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

-----  
 (PLEASE RETAIN THIS PORTION FOR YOUR RECORDS)  
**EquiClub Session**  
**FIELDSTONE FARM THERAPEUTIC RIDING CENTER (440) 708-0013**

**Sept. 13, 20, 27 and Oct. 4, 11, 18, 25.**

Paid \$ \_\_\_\_\_