



55 Shelburne Center Rd
Shelburne, MA 01370
(413) 625-0019

Summer Horsemanship Program
REGISTRATION FORM 2011

Name _____

Address: _____

Phone: (_____) _____ Birth Date ____/____/____

Email: _____

Describe previous riding experience, if any:

Check session (s) desired

July 5th _____

July 25th _____

July 11th _____

August 1st _____

July 18th _____

August 15th- _____ IEA Program

Cost is: \$325.00/1 week, \$600.00 / 2weeks, \$850.00/3 weeks, \$275.00/week 4 or more weeks.

Amount enclosed: \$ _____

Note: a \$50.00 deposit is required with this form.

Parent Signature _____