



Date Received at CKRH: _____

2012 SESSION I LESSON REQUEST

**REGISTRATION PAPERWORK & \$50.00 DEPOSIT MUST BE RECEIVED BY:
January 6, 2012**

OPTION 1:

Session Dates: Monday January 23rd through Saturday May 19th

Cost for this fifteen-week session is \$300.00. (One lesson per week.)

Therapeutic riding & horsemanship lessons will be offered Monday 3:00 – 5:00pm; Wednesday 1:00 – 4:30pm; Thursday 1:00 – 4:00pm; Saturday 9:00am – 12:00pm

Please enroll _____ Phone: _____

Email: _____

Please write three possible time & days you would like to participate.

1st Option: _____

2nd Option: _____

3rd Option: _____

PLEASE DO NOT CHOOSE MORE THAN ONE OPTION.

OPTION 2:

Session Dates: Monday March 12th through Saturday May 19th

Cost for this eight-week session is \$160.00. (One lesson per week.)

In addition to the above times, therapeutic riding & horsemanship lessons will be offered Monday 6:00 and 7:15pm; Tuesday 6:00 and 7:15pm; Thursday 6:00 and 7:15pm;

Please enroll _____ Phone: _____

Email: _____

Please write three possible time & days you would like to participate.

1st Option: _____

2nd Option: _____

3rd Option: _____

PONY CLUB OPTION:

To choose this option the rider must be a member of the US Pony Club. Please call Jenny if you are interested in more information.

Session Dates: Monday January 23rd through Saturday May 19th

Cost for this fifteen-week session is \$300.00. (One lesson per week.)

Pony Club lessons will be offered on Thursday at 5:00 & 6:00pm. If a member of Pony Club you will receive more details.

_____ will participate in Pony Club lessons.

CKRH will be closed for participant services the following dates:

February 27th through March 3rd for staff to attend PATH conference

April 2nd through April 7th for Fayette & Scott Co. spring break

April 23rd through April 28th for Rolex week in the horse park

March 31st for Paul Frazer horse show

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SERVICES: Please describe the type of services you would be interested in receiving. For example: Non-riding horsemanship, a class focused on sensory integration with leader & two sidewalkers, a class focused on independent riding or therapeutic driving. Please refer to the "Program" page of the CKRH website for a complete description of services.

INSTRUCTOR REQUEST: Do you have an instructor preference? Y N

If yes, please write in instructor name. _____

_____ I am not interested in riding during session I of 2012. However, I am returning 2012 registration so I may be on the list for Session II. Please check the CKRH web calendar for 2012 dates.

_____ I am not interested in participating. Please remove me from the mailing/waiting list. I will contact CKRH when interested.