



Jireh Farm
Riding Academy

Registration

Student name _____

Date of Birth _____

Parent(s) name(s) _____

Address _____

Telephone _____

Cell _____

Alt. # _____

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Please list prior riding experience. Include any lessons, shows, 4-H, Pony Club, etc.

What are your goals for your riding program? (Just for fun, plan to get own horse/pony, have own horse/pony and want to improve, I want to ride in the Olympics one day, etc.)

