

Apple Hill Stables, LLC

Lesson Registration Form 2019

Participant's Name: _____ Birth Date _____

Home/Local Address: _____

E-Mail: _____

Contact Name and Phone: _____

Emergency Contact: _____

Names of approved pick-up persons: _____

Riding Experience: _____

Please explain any health issues, allergies, anxieties we should be aware : _____

Medications: _____

Pediatrician's name and number: _____

If a hospital visit is necessary, do you consent to

Northern Light Hospital _____ If no, please advice:
_____ ?

I give permission for my child to be photographed for promotional purposes _____

I do not give permission for my child to be photographed for promotional purposes _____

Please wear: Riding pants or Jeans, Riding boots, Riding Helmets

Parent's Signature: _____ Date: _____

Please mail Registration to:

Apple Hill Stables, LLC

4261 Union Street Levant Me 04456

Telephone 207-745-2542

We accept Visa, Master, and Discover.

E-Mail [info@ Applehillstables.com](mailto:info@Applehillstables.com).to pay with credit card

Lesson Rates

Private - \$40.00 per hour

Semi Private -\$30.00 per hour

Private Lesson w/own horse-60.00 per 1.5 hour