



Palos Verdes Stables Lesson Program Enrollment Form

Last Name: _____

First Name: _____

FOR THE SAFETY OF YOUR CHILD, NO ONE UNDER THE AGE OF 16 IS ALLOWED IN THE STABLE AREA WITHOUT ADULT SUPERVISION. No child under the age of 16 will be allowed at the barn more than a half hour after the end of his/her lesson on any day of operation.

Rider(s) _____ Age: _____ DOB: _____ Height: _____ Weight: _____
(List any *additional riders below*)

Parent(s)/Guardian: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Parent E-Mail: _____ Rider: _____

Cell: _____ Home: _____ Work: _____

Emergency Contact Name: _____ Phone: _____

Do you give your consent for medical treatment, in an emergency? Yes ___ No ___

_____**MEDICAL CONSENT FORM COMPLETE AND ON FILE WITH PV STABLES**

_____**Copy of Insurance Card attached**

Previous riding experience? Yes ___ No ___

If yes, describe: _____

Additional Riders:

Rider(s) _____ Age: _____ DOB: _____ Height: _____ Weight: _____

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I understand payments are due on the first of each month. *In general there are no make-ups for missed or cancelled lessons (due to free lessons already built into packages), but we will try and accommodate 1 make-up lesson per month—based on advanced notice and availability. There are no monthly rollovers for unused lessons. If special circumstances arise, please contact trainer and they will do their best to accommodate.*

Please make checks payable to: PVStables Riding Lesson Program/Alden Giacopuzzi

_____ Date: _____

Parent/Guardian Signature *(Must be signed by Parent/Legal guardian if under 18)*