

# Public Summer Riding Lessons

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Parent Work Phone: \_\_\_\_\_ Parent Cell: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Parent Work Phone: \_\_\_\_\_ Parent Cell: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Does this student have any mental or physical limitations? Yes No Please explain: \_\_\_\_\_

If possible, we'd like to sign up with these friends: \_\_\_\_\_

The riding student, and/or its parents or guardians holds Golden Ridge Stables, Inc., Ann Graney Hoffmann, and Thomas W. Hoffmann, or the instructor harmless and indemnifies same from any and all claims, causes of action, liability or responsibility for any injury or damage incurred to undersigned riding student, its guests or third parties occasioned by an action of student or student's horse or any other similar circumstances upon the premises. The student, its guests or third parties assume all risk for riding or injury occurring while adjacent to or upon any horse or any other similar circumstances upon the premises.

Student's Signature \_\_\_\_\_ Parent's Signature \_\_\_\_\_

## Tuition: \$325/8 weeks or \$185/4 weeks

Tuesdays <u>8 weeks</u> : 6/29, 7/6, 7/13, 7/20, 7/27, 8/3, 8/10, 8/17	6 - 7 p.m.	_____
Wednesdays <u>8 weeks</u> : 6/30, 7/7, 7/14, 7/21, 7/28, 8/4, 8/11, 8/18	7 - 8 p.m.	_____
Thursdays <u>8 weeks</u> : 7/1, 7/8, 7/15, 7/22, 7/29, 8/5, 8/12, 8/19	5 - 6 p.m.	_____
Saturdays <u>8 weeks</u> : 7/3, 7/10, 7/17, 7/24, 7/31, 8/7, 8/14, 8/21	10:30 - 11:30 a.m.	_____
Saturdays <u>8 weeks</u> : 7/3, 7/10, 7/17, 7/24, 7/31, 8/7, 8/14, 8/21	12:30 - 1:30 p.m.	_____
Tuesdays <u>4 weeks</u> : 7/6, 7/13, 7/20, 7/27	9:30 - 10:30 a.m.	_____
Tuesdays <u>4 weeks</u> : 7/6, 7/13, 7/20, 7/27	11:30 a.m. - 12:30 p.m.	_____
Thursdays <u>4 weeks</u> : 7/8, 7/15, 7/22, 7/29	11:30 a.m. - 12:30 p.m.	_____
Thursdays <u>4 weeks</u> : 7/8, 7/15, 7/22, 7/29	9:30 - 10:30 a.m.	_____



- **One make up lesson is allowed and will be available the week of August 29. Full payment must accompany registration.**
- No refunds are given without a doctor's excuse and your spot is filled.
- Scheduling changes may be considered on a space available basis with a \$25 charge.
- You will receive confirmation of your date and time via e-mail.
- **Please mail signed registration form & check to:**

**Golden Ridge Stables, Inc.,  
8315 190th St. W.,  
Lakeville, MN 55044**

# Summer Riding Program

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Parent Work Phone: \_\_\_\_\_ Parent Cell: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Parent Work Phone: \_\_\_\_\_ Parent Cell: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Does this student have any mental or physical limitations? Yes No Please explain: \_\_\_\_\_

If possible, we'd like to sign up with these friends: \_\_\_\_\_

The riding student, and/or its parents or guardians holds Golden Ridge Stables, Inc., Ann Graney Hoffmann, and Thomas W. Hoffmann, or the instructor harmless and indemnifies same from any and all claims, causes of action, liability or responsibility for any injury or damage incurred to undersigned riding student, its guests or third parties occasioned by an action of student or student's horse or any other similar circumstances upon the premises. The student, its guests or third parties assume all risk for riding or injury occurring while adjacent to or upon any horse or any other similar circumstances upon the premises.

Student's Signature \_\_\_\_\_ Parent's Signature \_\_\_\_\_

## Please indicate a first & second choice.

1. \_\_\_\_\_ June 14 - 18 9 a.m. to Noon
2. \_\_\_\_\_ June 21 - 25 9 a.m. to Noon
3. \_\_\_\_\_ June 21 - 25 1 p.m. to 4 p.m.

**Cost: \$325/student**

## Mail registration form and check to:



8315 190th St. W.  
Lakeville, MN 55044  
952.469.4640

[www.GoldenRidgeStables.com](http://www.GoldenRidgeStables.com)

- **Full payment must accompany registration.**
- Student must enroll for entire week.
- No refunds are given without a doctor's excuse and your spot is filled.
- Scheduling changes may be considered on a space available basis with a \$25 charge.
- You will receive confirmation of your date and time via e-mail.