3-C Farm Horsemanship School

Pam & Alan Cornett 3783 E. Foster-Maineville Rd Morrow, OH 45152 513-899-2730 www.3FarmHorsemanshipSchool.com

CLASS AGREEMENT

Please complete this form (be sure to fill in all blanks) and return to Pam Cornett.

All checks are to be made out to PAM CORNETT

We start beginners and finish winners!

	•			
Student:	int full name		Birth Date:	
			(mc	onth, day, year)
Address:	Street	City	ST	ZIP
Home Phone	:	,		
Work Phone:		Contact Name:		
Cell Phone:_		Contact Name:		
Email addres	SS:			
EMERGENC	Y CONTACT:			
1. Name:		Relationship:	Phone:	
2. Name:		Relationship:	Phone:	
Where did yo	ou hear about our school:			
Do you have If yes, you m	your doctor's permission to ride: ust have written permission from yo	Do you have any ur doctor allowing you to tak	physical problems: te riding lessons at 3-0	Farm.
instruction or	itation Classes: \$80.00 a class. The horse and 15 minutes of coolings/instructor class.			
	ses: \$60.00 a class. This consists of minutes of cooling down the horse			
Matic on hors	ses: \$80.00 a class. This consists seback and 15 minutes of cooling doling will be allowed to take this class	own the horse and putting it	away. Only students t	
Group Ropin	ng Classes: \$20.00 a class. This o	consists of 30 minute classe	s with 2-3 students per	· class.
Sessions:	Spring: April, May June Fall: October, November, Decei		July, August, Septembo nuary, February, Marcl	
for all your ric scheduled cla classes. We same month	must fill out the Reservation and Red ding lessons. If a student is ill or is d ass time or you will be charged for the have voice mail specifically for this of the scheduled time and cancellat we a doctor's note dated the day of the	out of town, you must call <u>A</u> he class – NO EXCEPTION purpose, so please use it. I ion. If you are sick the day	T LEAST 48 HOURS (S. This includes both Make-up classes will be	2 DAYS) before your private and group e made up only in the
month. Retu loss of equipo conditions in carry and use	e due one month in advance or you rned check fee is \$75.00. Neither 3 ment or personal property to horse of the Horsemanship Class Agreement of their own insurance in case of any med student to take horseback riding.	 Farm nor the instructors or student. I, the undersignent. Students and student's he injuries that could occur at 	shall be responsible for ed, have read and fully orses brought to class anytime at 3-C Farm.	or any injury, death, and agree to the above es or horseshows must I give permission for
STUDENT S	IGNATURE:		DATE:_	
PARENT SIG	GNATURE:der 21 years of age)		DATE:_	