

Equestrian Participant Record Form

Greenacres Horsemanship Academy, LLC dba Greenacres Equine Center

Participant's name: _____ Date ____/____/____
Nickname: _____

Parent(s) or Guardian(s) name: _____
Address: _____ City _____ Zip _____
E-mail address: _____ Phone #: h _____ w _____ c _____

Parent or Guardian, please fill-in the following information:

Participant's birth date ____/____/____ (Participant must be 8 years old to ride a horse)
Participant's weight (in pounds/lbs): _____

Initials _____ Date ____/____/____

Restriction:

Rider's weight is not to exceed 20% of the horse's weight. For example a 200 lbs rider's horse must have a minimum weight of 1,000 lbs, $200/1,000 = 20\%$. GEC's horses vary in weight. For both the rider and horse's safety, GEC restricts the maximum weight of all riders to 200lbs.

Horse riding experience level: (for minor children parent or guardian must indicate experience level)

- ___ Introductory (in a ring setting, has had fewer than 7 English style riding lessons)
- ___ Level 1 [capable of posting at a trot (in a ring setting, has had more than 7 English style lessons)]
- ___ Level 2 [capable of sitting a canter and controlled post on the correct diagonal (beginning jumper)]
- ___ Level 3 (capable of controlled canter on correct lead and jump cross-rail courses)
- ___ Level 4 (exhibits good horse control; capable of handling 2 foot jumps)

Participant and/or Guardian's Initials _____ Date ____/____/____

Comments:
