



STEPPING STONE FARM

20 Mopus Bridge Road, Ridgefield, CT 06877

Office Phone #: 203-438-7749 Fax: 203-438-7750

Website: steppingstonefarmct.com

PLEASE CONTACT THE OFFICE PHONE NUMBER FOR FURTHER INFORMATION

2020/2021 PROGRAM PARTICIPANT REGISTRATION

LAST _____ FIRST _____ GUARDIAN _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE (____) _____ ALT. PHONE (____) _____

EMAIL ADDRESS _____

RIDER'S AGE (if applicable or please enter "Adult" if not a child) _____

RIDING EXPERIENCE (please circle) Beginner Advanced Beginner Intermediate Advanced

LESSON PROGRAM (Please Circle)

Fall II - October 19, 2020 - December 13, 2020

Spring II - May 31, 2021 - July 25, 2021

Fall III - December 14, 2020 - February 7, 2021

Summer - July 26, 2021 - August 22, 2021 (**4 Weeks \$240**)

Winter - February 8, 2021 - April 4, 2021

Fall I - August 23, 2021 - October 17, 2021

Spring 1 - April 5, 2021 - May 30, 2021

LESSON COST

8 Week Session - 1 hour Group - **\$480**/per person (\$60 per lesson with purchase of session)

8 Week Session - ½ hour Private - **\$680**

8 Week Session - 1 hour Private - **\$1,360**

Single - ½ hour Private Lesson - **\$85**

Single - 1 hour Private Lesson - **\$170**

Lesson Day & Time (first choice) _____ (second choice) _____

***Make up classes will be honored only during the current 8 week session.**

Only 2 makeups per 8 week session

WAIVER OF FARM LIABILITY

I recognize that this activity involves risk of injury and that because of the nature of this activity, an injury might occur. In the event of an injury to myself or to a family member, I give permission to the attending physician to render any treatment he deems necessary and agree to pay for such treatment. I agree to release Stepping Stone Farm, Inc., its affiliates, employees and instructors from any and all liability related to any injury. I have sustained or may later sustain while engaging in this activity, and to hold Stepping Stone Farm Inc., its affiliates, employees, and instructors harmless from any claim, cost, or expense related to any injury I have sustained or may later sustain while engaging in this activity. I acknowledge that I have read this statement, fully understand it and sign voluntarily.

SIGNED _____ DATE _____

Please make checks payable to: **Stepping Stone Farm.** Checks are **Non-Refundable**