

Please read and complete this document thoroughly (2 pages)

**River Valley Riders
2024 Waiting List Registration**

Payment of the \$50.00 non-refundable registration fee for each participant must accompany this form for the registration to be accepted.

Participant's Name _____

Guardian/Parent Name(s) _____ Independent Adult

Best phone number to reach you at _____ Home Cell

Email _____

Mailing Address _____

Primary diagnosis _____ Is the rider ambulatory? Yes No

Please mark all lesson times which you would consider. The more times selected will increase the chance you will receive a lesson time. Call 651-439-2558 with any questions or concerns. Please note restrictions for some of the class times.

GROUP Therapeutic Riding Lessons at Afton Site:

Mondays: ___ 5:00pm ___ 6:00pm ___ 7:00pm

Tuesdays: ___ 5:00pm ___ 6:00pm ___ 7:00pm

Wednesdays: ___ 5:00pm ___ 6:00pm ___ 7:00pm Independent Riders

Thursdays: ___ 5:00pm ___ 6:00pm ___ 7:00pm Independent Riders

Riders in the Wed. 7:00pm or Thurs. 7:00pm classes must be able to independently control their horse with appropriate rein/leg/vocal cues and require no side-walker support, with a goal to ride in the arena with no horse leader attached.

PRIVATE Therapeutic Riding Lessons at Afton Site:

Wednesdays: ___ 2:00pm ___ 3:15pm

Minimum age is 10 years old. To participate in private lessons, a rider must be able to mount with minimal assistance, independently control their horse with appropriate rein/leg/vocal cues and require no side-walker support, with a goal to ride in the arena with no horse leader attached.

PRIVATE Carriage Driving at Afton Site:

Mondays: ___ 12:30pm ___ 1:30pm ___ 4:00pm ___ 5:00pm

Thursdays: ___ 1:30pm ___ 2:30pm ___ 4:00pm ___ 5:00pm

Drivers must have a minimum height of 5 feet unless using a wheelchair. Scheduling of appropriate vehicle and horse is a factor in determining lesson time. 4:00pm and 5:00pm driving lesson times will be outdoors only and canceled for weather as determined by the instructor team.

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River Valley Riders follows the PATH Intl. guidelines for all aspects of our program, including their defined precautions and contraindications to riding and driving. **RVR reserves the right to deny our services if we determine there are medical, safety or participation concerns for the rider, driver, horse or volunteer.**

Due to equipment available and safety concerns for the rider/driver, volunteers, and horses, the participant's weight, balance and mobility may limit participation and hour for assigned lesson. **Please include an accurate participant weight and height on this form.**

Rider's weight _____ lbs.

Height _____ ft. _____ inches

Date of Birth ____ / ____ / _____

Age _____

I have read and understand the above statements:

Signature – Parent/Guardian/Independent Participant

Date

Registration Checklist:

- Complete and sign this registration form.
- Complete and sign the "Participant Liability and Photo Release/Waiver" form.
- Have the "Medical History & Physician's Statement" form completed by a licensed medical provider. ***If this will significantly delay your response, please send in the other 2 forms and \$50 check ASAP. The medical form must be received within 60 days to keep your place on the waiting list.***
- Include a check for \$50 to River Valley Riders for the non-refundable registration fee for 2024.
- Mail all forms and \$50 check to:
River Valley Riders
8362 Tamarack Village
Suite 119-440
Woodbury, MN 55125

Registrations are NOT accepted electronically.