

School Enrollment Form

Name _____

How many years of experience have you had with horses? _____

Type of riding activities you participate in with your horse/s:

Pleasure/TraiDressage/Eventing/ Reining
 Showing Barrels/Gaming Cutting
 Mountain/Packing/Endurance Roping Team Penning
 Ranch/Cow Work Other: _____

Age, breed & sex of horse you are bringing: _____

Level of training: (Check all that apply)

Unstarted Neck Reins Trained for Show/Competition
 Green Broke Older / Finished / Needs "Tune-Up"
 Over 4 years, but still green Needs Reschooling (Has Problems)

Age, breed & sex of second horse you are bringing: _____

Level of training: (Check all that apply)

Unstarted Neck Reins Trained for Show/Competition
 Green Broke Older / Finished / Needs "Tune-Up"
 Over 4 years, but still green Needs Reschooling (Has Problems)

Problems you & your horse need help with:

Goals you have for you & your horse:

Payment Options:

Enrolled In: Session Number _____ Dates of Class: _____ Use of WH Trained Gelding \$300/Class? Yes No
Bringing a Second Horse \$500/Class? Yes No

Method of Payment Check Money Order Visa MasterCard

Credit Card # _____ Expiration Date _____

Payment Option: Payment in full \$ _____

50% Deposit: Amount of Deposit \$ _____

Wil Howe Trained Horse Rental \$300.00/Second Horse \$500.00 \$ (pay at class)

I will send my Final Payment on _____ (see payment due dates) and pay any Second Horse or Wil Howe trained horse fees upon my arrival at the school.

Signed _____ Date _____

An additional Information Packet & Release Forms will be sent out upon receipt of this enrollment form & Deposit/Payment.

SEND or FAX FORMS & DEPOSIT/PAYMENT TO:

Wil Howe Ranch
35768 Governor Lane, Richland, OR 97870

STUDENT PROFILE

Name: _____ Email: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: Days (____) _____ Evenings (____) _____

Occupation: _____

In Case of Emergency, Please Notify:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: Days (____) _____ Evenings (____) _____

Are there any Medical Conditions/Allergies which we should be aware of? Yes (Please explain below) No

Please specify your plans for accommodations:

____ Bunkhouse (Oregon Ranch Only)

____ On-site Camper/RV

____ Motel

Release/Waiver:

Due to the nature of the School, in the fact that it involves horses and the unpredictability associated with horses and horse-related activities, and the knowledge which I have undertaken to learn for myself, as well as the information provided, I am aware of the risks, hazards and dangers inherent to participating in the Wil Howe School of Fine Horse Training. I elect voluntarily to participate in this School, and its entire agenda of horse-related activities. I hereby personally assume all risks in connection with the School and I release the Wil Howe School of Fine Horse training, Wil Howe Ranch and other facilities used for the purpose of the school, its owners, officers, directors, agents, employees, horse owners and landowners from any liability of any kind or nature for injury or damage which may befall me or my property (including horse(s) and tack) while I am participating in the School, or while I am at the Wil Howe Ranch or facility used for the purposes of the school, including but not limited to loss of compensation.

I am also aware that I am held responsible and liable for the actions of any horse that I bring to the Wil Howe School of Fine Horse Training, and that I am therefore responsible and liable for any damages or injury to private property, etc. caused by this/these horse(s).

Once the School is in session, should I decide to withdraw from the school's agenda for any reason, there will be no refunds.

I have read and accept the terms above:

Student

Date

WIL HOWE RANCH

35768 Governor Lane, Richland, OR 97870

Any questions, Call: 520-826-0188 (AZ – December – April)
541-893-6535 (Oregon Ranch - May - November)

Fax Number: 541-742-2115