

# Foster Farm

## Riding Contract

Rider Name: \_\_\_\_\_ Rider Birth Date: \_\_\_\_\_ (If Rider is under 18)  
Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
e-Mail: \_\_\_\_\_

Is the Rider on any medication we need to know about? \_\_\_\_\_  
Does the Rider have any medical or physical conditions that may limit their horseback riding ability? \_\_\_\_\_  
\_\_\_\_\_

How did you hear of Foster Farm? \_\_\_\_\_  
Is there someone we can thank for the referral? \_\_\_\_\_

### Emergency Contact

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_

I understand the known and unknown dangers in riding horses and do not hold Foster Farm or its associates responsible for any accident that could happen to me, my child, my friends, my family, or my associates. I have been informed, understand and agree that while horseback riding lessons are supervised, the nature of riding a horse contains risks out of anyone's control. I give permission to Foster Farm associates to give emergency medical treatment if needed. A copy of this form will be available to all responding medics, in case of an emergency.

### Please notice:

- Returned checks will be charged a nonrefundable \$40 service charge.
- Lessons are to be paid for in advance of mounting the horse.
- Lessons must be cancelled a **minimum of 24 hours** before the scheduled lesson time to avoid having to pay for that lesson.
- Foster Farm requires all Riders under 18 years old (and suggests everyone) wear protective head gear while riding. Bicycle helmets are acceptable for a Riders first three lessons only. A helmet may be available for use if requested.

Foster Farm Associate: \_\_\_\_\_ Date: \_\_\_\_\_

Rider or Parent: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent/Guardian to sign here if Rider is under the age of 18)



*Foster Farm*

Natalie Payne, Instructor  
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