



## Dr. Fountain's Horsemanship Club



At Dr. Fountain's Horsemanship Club, children will be able to gain valuable skills in a structured environment with experienced mentors.

## Dr. Angela Fountain & Associates

1037 Howden Rd E  
Oshawa ON, L1H 0L7  
905-655-5813

[www.drffountain.ca](http://www.drffountain.ca)



Children will have the opportunity to use this recreational program to learn skills in horse handling, care, safety, stable management, groundwork and riding.

\*\*\* Both riding and groundwork will be used as a foundation to teach children basic horsemanship skills\*\*\*

**(Gr 1-8): Wednesdays 4:30-6:00pm -> Jan. 9<sup>th</sup> - Mar. 6<sup>th</sup> (9 weeks)**

Register by Dec. 15<sup>th</sup>: \$30 (+ HST)/session for 9 weeks = \$270 (+ HST)

After Dec. 15<sup>th</sup>: \$32 (+ HST)/session for 9 weeks = \$288 (+ HST)

## Dr. Fountain's Horsemanship Club Registration Form

Child's Name: \_\_\_\_\_

Child's Weight (lbs): \_\_\_\_\_ Child's Height: \_\_\_\_\_

Your Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Gender: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Purpose for registering your child in Horsemanship Club:

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Is your child seeing a therapist within our office? \_\_\_\_\_

If yes who: \_\_\_\_\_

Does your child have any previous riding experience? If so, what has your child done previously?

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Does your child have any medical or psychological diagnoses? If yes, please explain.

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Does your child take any medications? If yes, please list medication and time of administration:

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Does your child have any allergies? If yes, please list allergy and symptoms when in contact:

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Please check one option:

- My child will need to rent a helmet (\$10 for all 9 weeks)
- My child will provide their own certified horse-riding helmet

Please check your payment option:

- I have paid or attached the full amount for Horsemanship Club (\$270 + HST/ \$288+ HST )
- I have put a credit card on file to be charged bi-weekly for Horsemanship Club

I understand that I have registered my child for Horsemanship Club at Dr. Fountain's for the above duration of time. **I understand that I am responsible for all payments for Horsemanship Club even if my child is away for one week or drops out of the program.** I understand that this is a recreational only program and therefore my invoices will reflect this. I understand that Horsemanship club **will run rain or shine** and indoor and groundwork equine activities will be used on bad weather days.

REFUND POLICY: Refund (less \$25/admin fee) up to Jan. 9. No refunds past first week of group.

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Parent/Guardian Signature

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Date