For office use:	
Account #:	_

## The Fairfield County Hunt Club Inc.

174 Long Lots Road Westport, CT 06880 (203) 227-8445

## **Introductory Riding Lesson Package Form**

Four (4) group lessons to be given on a FCHC School Horse/Pony.

Non refundable lesson package fee \$200.00.

Lessons times and days are limited and to be determined by instructors. Space Limited.

	Date of Birth:			
	Date of Birth:			
	Date of Birth:			
Financially responsible parent or guardian: (address listed below will be used as billing address)				
State:	Zip Code:			
	Email::			
	Cell Phone:			
	(Business Address)			
ot be reached:				
	Tel			
	Tel			
	ress listed below State:			

You must sign the riding waiver on the back side of this form.

Parent or guardian and (all of) the applicant(s) must meet with Stables Manager, Robyn Pavone before purchasing Introductory Lesson Package.

PLEASE READ THE REVERSE SIDE OF THIS APPLICATION AND AGREEMENT FOR THE TERMS AND CONDITIONS OF INTRODUCTORY LESSON PACKAGE. APPLICATION AND AGREEMENT ARE TO BE CONSIDERED ONE DOCUMENT.

- 1. Applicants must be and neither a former or current member of the Fairfield County Hunt Club.
- 2. Lessons must be paid in full prior to scheduling lessons. No lessons will be given prior to full payment. No refunds.
- 3. Lessons are to be taken within 60 days of acceptance. Black out dates apply. Lessons are not transferrable.
- **4.** Proper riding attire is required. Long pants, heeled boots and an approved riding helmet. All attire must be approved by a FCHC Instructor for safety reasons.
- **5.** Both the lesson participant and the financially responsible parent or guardian (for myself and on behalf of the minor lesson participant) agree to the following limitation of the Clubs liability:
  - I agree to waive all claims against the Club for any damage to any horse or other property kept or maintained at the Club caused by me, my child or ward and/or my horse.
  - b. I agree for both myself and my child or ward to waive all claims against the Club for personal injuries, pain and suffering or wrongful death suffered by me or my child or ward as a result of riding or boarding a horse or horses at the Club.

Signature of parent or guardian	Date
Signature of applicant	Date
Signature of applicant	Date