

**APPLICATION**  
**Winter Training Program with**  
**ERIC HORGAN**  
**\*\*\*\*\* Winter 2018 \*\*\*\*\***

<b>Name</b> _____			
<b>Mailing Address</b> _____			
<b>Town</b>	<b>State</b>	<b>Zip</b>	
_____		_____	
<b>Home Telephone</b> _____		<b>cell phone</b> _____	
<b>E-mail Address</b> _____			
<b>How do you prefer to be contacted, i.e. USPO or email</b> _____			

<b>Health insurance carrier</b> _____	
<b>Group/Policy Number</b> _____	
<b>Emergency Contact in case of accident</b> _____	<b>phone</b> _____
<b>Do you have any health issues or past injuries we should be aware of, i.e. asthma, diabetes, neck/back injury?</b> _____	
_____	

**Please describe your riding background, including your level of instruction, and any competition history with the horse(s) you are riding.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please give some background on the horse(s) you will be riding (if more than one horse, please use the back of the page):**

**Name** \_\_\_\_\_ **Breed** \_\_\_\_\_ **Age** \_\_\_\_\_ **Sex** \_\_\_\_\_

**Level of training/competition:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does your horse(s) have any health or soundness concerns that I should be aware of? \_\_\_\_\_

If yes, please explain. \_\_\_\_\_

Eric's instructional approach is goal-oriented, with the aim being to help each rider achieve the goals he or she establishes for you and your horse. Please state the riding/training goal(s) you wish to accomplish with Eric. The more specific you can be, the better. If you are riding more than one horse, please list your goal(s) for each horse separately.

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Please list any specific training issues that might need to be addressed in order for you to meet your goal(s). \_\_\_\_\_

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What, if any, competition plans do you have while in Aiken? Please give the dates. \_\_\_\_\_

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Please feel free to use the back of this sheet to give any additional information about you or your horse(s) that will make the instructional sessions more productive for you.

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I understand that horseback riding is a high-risk activity. I am participating at my own risk. I hereby release and hold harmless Eric D. Horgan, and any Organizers, Volunteers, or Property Owners, including but not limited to Jumping Branch Farm, from all liability for any accidents, damage, injury or illness to horses, owners, riders, employees, attendants, spectators or to any other person or property suffered during, or in connection with, this instructional program.

Signed \_\_\_\_\_ Date \_\_\_\_\_

*All checks are to be made out to Eric D. Horgan.*