



Service Horse School Registration Form

WALKING HORSE OWNERS' ASSOCIATION

Name: _____

Department or Organization: _____

Status (circle all that apply): Full Time Mounted Part Time Mounted
 Volunteer Sworn Non-Sworn
 Researching and Attempting to Develop a Program
 Interested in Joining a Search and Rescue Group

Registration Fee: \$35.00

Number of Stalls Needed (\$10.00 per stall for entire week): _____

Number of RV Hookups (\$15.00 per day): _____

Personal Address: _____

Email: _____ Phone: _____

I UNDERSTAND THAT THE INFORMATION GIVEN CONSISTS OF THE PERSONAL OPINIONS OF THE INSTRUCTORS AND WHAT THEY CONSIDER BEST PRACTICES. POLICIES AND LAWS IN DIFFERENT JURISDICTIONS VARY, SO YOU SHOULD CONSULT YOUR DEPARTMENTAL POLICIES AND THE STATE, LOCAL, AND FEDERAL LAWS BEFORE IMPLEMENTING ANYTHING LEARNED AT THIS CLINIC.

I UNDERSTAND THE NATURE AND DANGER OF THE TRAINING I AM PARTICIPATING IN. I WILL NOT HOLD THE WALKING HORSE OWNERS' ASSOCIATION, THE INSTRUCTOR, WILLIAMSON COUNTY AG EXPO, OR ANY OF ITS MEMBERS OR STAFF LIABLE FOR ANY INJURIES OR DAMAGES THAT MAY OCCUR.

Signature: _____ Date: _____

Arrival Date and Registration Day is June 15, 2015

Classes Start on June 16, 2015 at 0800 HRS

Registration Forms DO NOT have to be submitted by June 1, 2015

Return completed form to jdharber@gmail.com or
JD Harber, 4813 Lynn Dr., Nashville TN 37211