



# Once upon a Horse

changing the world  
one cowpoke at a time

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## REGISTRATION FORM

Rider's Name \_\_\_\_\_ Date \_\_\_\_\_

Rider's Age \_\_\_\_\_ Rider's Birthday \_\_\_\_\_

Event \_\_\_\_\_ Event Date and Time \_\_\_\_\_

Guardian's Name (If rider is younger than 18) \_\_\_\_\_

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Additional Emergency Contact \_\_\_\_\_

Emergency Phone \_\_\_\_\_

Allergies, Sensitivities, Medications, or Special Needs we should know about: \_\_\_\_\_

We suggest that you discuss with your doctor the possibility of pre-medicating with an antihistamine-type medication that does not induce sleepiness if you or your child has pet-dander allergies.

Sometimes we take pictures of our parties, lessons, and camps. May we use your child's photo or your photo on our website or in our brochure? Yes \_\_\_\_\_ No \_\_\_\_\_

We take extraordinary care of our riders at Once upon a Horse. We have a strong record of safety and have had no serious injuries in our programs. Still, the horses are real, live animals. They are very large, and as unlikely as it is that such a thing would occur, accidents are a possibility. Please read and sign this form:

I understand that the caring for and the riding of horses are inherently dangerous activities. I understand that riding may include falling off, which may result in injury or death. I agree to indemnify and hold harmless ONCE UPON A HORSE, its employees, and/or assigns from and against all claims and liabilities including incidental cost and expense for injury to, or death of my person or persons, or for loss and/or damage to any property arising from, or in any way connected with the performance of services by ONCE UPON A HORSE, its assignees, or any employee.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please print, complete, and submit this form to

Once upon a Horse P.O. Box 482 Lake Oswego, Oregon, 97034

Directions will be mailed \_\_\_\_\_ or emailed \_\_\_\_\_ as requested.