

National Ability Center Spring 2010 Registration Form



Rider Name: _____ Rider Level: _____ Date: _____
 Rider weight: _____ Height: _____ Age: _____ Disability: _____
 Phone: home: _____ Cell: _____
 Parent/Guardian: _____ Email: _____

___ Spring (April 12th - May 29th) *7 week session
*****There will be no lessons on Saturday, May 15th*****

PLEASE INDICATE AT LEAST YOUR 1ST, 2ND, AND 3RD CHOICE OF RIDE TIMES. We will do our best to accommodate your 1st or 2nd choices. Spaces in our classes will be filled based on the order in which the registration forms are received in our Administrative Office. Riders with a disability have priority in the group registration process.

GROUP LESSONS (2-4 PEOPLE): \$175/ rider with disability and \$245/rider without disability
SATURDAYS: \$150/ rider with disability and \$210/rider without disability

Novice Level 1 <input type="checkbox"/> Monday 2:30-3:50 <input type="checkbox"/> Tuesday 1:00-2:20 <input type="checkbox"/> Wednesday 4:00-5:20 <input type="checkbox"/> Thursday 1:00-2:20	Intermediate Level 5&6 <input type="checkbox"/> Tuesday 5:30-6:50 <input type="checkbox"/> Thursday 5:30-6:50 <input type="checkbox"/> Friday 3:30-4:50	Advanced Level 8 <input type="checkbox"/> Friday 5:30-6:50	\$ _____ \$ _____
Novice Level 2&3 <input type="checkbox"/> Monday 4:00-5:20 <input type="checkbox"/> Tuesday 3:30-4:50 <input type="checkbox"/> Wednesday 1:00-2:20 <input type="checkbox"/> Wednesday 5:30-6:50 <input type="checkbox"/> Thursday 4:00-5:20 <input type="checkbox"/> Friday 10:30-11:50 <input type="checkbox"/> Saturday 10:00-11:20	Intermediate Level 7 <input type="checkbox"/> Friday 1:30-2:50 <input type="checkbox"/> Saturday 1:30-2:50	Advanced Level 9 <input type="checkbox"/> Saturday 4:30-5:50	
Novice Level 4 <input type="checkbox"/> Monday 5:30-6:50 <input type="checkbox"/> Saturday 12:30-1:50			

PRIVATE LESSONS: \$245/rider with disability
SATURDAYS: \$210/rider with disability

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	
-----	-----	-----	-----	-----	10:00	\$ _____
-----	1:00	1:00	1:00	1:00	11:00	\$ _____
2:00	2:00	2:00	2:00	2:00	12:00	
3:00	3:00	3:00	3:00	3:00	1:00	
4:00	4:00	4:00	4:00	-----	2:00	
5:00	5:00	5:00	5:00	5:00	3:00	
6:00	6:00	6:00	6:00	6:00	4:00	

Payment is expected with this registration form in order to be granted your lesson requests. Please include a check when mailing this form or complete the credit card information below.

Credit Card #: _____ Exp: _____

This registration form is due by **March 31, 2010**. Confirmation letters will be mailed two weeks prior to the start of session for riders with a disability and one week prior to riders without a disability.

Our fees cover only 30% of the program costs. If you would like to contribute we welcome any size donation.

Donation \$ _____

Total \$ _____