

2021 GMTRC Availability Card

Participant's Name: _____ Date: _____

Session Schedule

1	Feb 1 – Mar 13
2	Mar 22 – May 1
3	May 10 – Jun 19 (Make up for Memorial Day – Jun 28)
4	Jul 5 – Aug 14
5	Aug 30 – Oct 9 (Make up for Labor Day—Oct 11) (Make-up for Horse Show—Oct 16)
6	Oct 25 – Dec 4 (Make up for Thanksgiving is Dec. 9)

I would like to ride in: (circle ALL choices)

SESSIONS: 1 2 3 4 5 6

Adult Horsemanship Clinics: (Ages 16 & up) Saturdays 1—3 pm

Mar 13 Apr 10 May 15 Jun 12 Aug 14 Oct 9

Session Times

MON	TUES	WED	THURS	SAT
9:00 AM		9:00 AM		9:00 AM
10:00 AM		10:00 AM		10:00 AM
11:00 AM		11:00 AM		11:00 AM
4:30 PM	4:30 PM	4:30 PM	4:30 PM	
5:30 PM	5:30 PM	5:30 PM	5:30 PM	
6:30 PM	6:30 PM		6:30 PM	
7:30 PM	7:30 PM		7:30 PM	

Circle ALL times available.

Write in:

1st Choice: (Day) _____ (Time) _____	2nd Choice: (Day) _____ (Time) _____	3rd Choice: (Day) _____ (Time) _____
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FILL OUT BOTH SIDES—PROMPTLY MAIL TO:

PO BOX 10724, LANCASTER, PA 17605-0724

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Participant's Name: _____ Date: _____

OFFICE USE: Pre-ride date _____ Time _____

Please Print Clearly

Age: _____ * Height: _____ * Weight / lbs: _____ * *(Needed to match appropriate horse)*

Designate Contact Person for Scheduling: _____

Parent or Guardian: _____ Relationship: _____ Email: _____

Phone: (H) _____ (C) _____ (W) _____

Caregiver: _____ Organization: _____ Email: _____

Phone: (H) _____ (C) _____ (W) _____

Alternate emergency contact: _____ Relationship: _____ Phone: _____



FILL OUT BOTH SIDES AND PROMPTLY MAIL FORM TO:

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