

## **HOPE Therapeutic Riding Center**

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## **REGISTRATION FORM FOR SESSIONS**

Chec	k the Quarter for	Check Your Pres	<b>Check Your Preferred</b>	
Locat	<u>tion</u>			
	Winter Quarter Spring Quarter Summer Quarter Fall Quarter	20 20 20 20	Coupeville Langley/Freeland	
Chec	k the Times of Day	Y You Are Available to Ric	<u>le:</u>	
	Mornings Specify Times Available:			
	Afternoons Sp	ecify Times Available:		
Quart Stude	er \$180. For new st	are \$240.00, for Winter and udents, there is an additional eseparate paperwork for inf	al charge of \$30.00 for the	e New
	od of Payment:	·		
	Check Money Order Visa Mastercard Discover Card Diners Club American Expres	S		
Name on Card Date Billing Address for Credit Ca		Credit Card #	Security Code	Exp.
Stude	ent Name:			
<u>Phon</u>	<u>e</u> :	<u>Email</u> :		

Please submit this registration form WITH ALL OTHER REQUIRED
PAPERWORK AND FEES prior to the registration deadline for this session, or one week prior to that time for scholarship students.