

LESSON CONTRACT 2023

Rider Information
Lesson Policies
Authorization for Medical Treatment
Release of Liability

I. Rider Information

Name: _____

Permanent Address: _____

Preferred Phone Number: _____

Secondary Phone Number: _____

Email Address: _____

Emergency Contact (name/ phone): _____

How many years have you been riding? _____ D.O.B. _____

Please circle your experience level: Beginner Intermediate Advanced

Please alert the instructor to any medical condition that may impair your ability to safely handle a horse (ex. history of seizures, significantly impaired vision, diabetes, etc.).

II. Lesson Policy

A. Cancellations: Lessons may be canceled by the rider up to 24 hours before the scheduled time at no cost. *Any lesson canceled less than 24 hours before the scheduled time or lessons for which the client fails to show without notice will incur the fee of one-third (1/3) the lesson cost, to be billed at or before the end of the month.*

B. Rescheduling: Lessons may be rescheduled without additional cost as long as notice is given at least 24 hours in advance of the scheduled time. If rescheduled with less than 24 hour notice, the originally scheduled lesson will be considered a cancellation and follow the above policy.

C. Fees:

1 Hour Lessons: \$60 private, \$50 group, \$180 for 4 Lessons(group or private), \$325 for 8 lessons(group or private).

½ Hour Lessons: \$30 single, \$100 for 4 Lessons, \$180 for 8 Lessons

Packages MUST be paid on the date of the 1st lesson in the package.

Clients will be given at least 30 days notice of any changes in fees.

D. Payments: Clients will be notified of any unpaid fees at the end of the month in which the fees were accrued. Fees must be paid within 7 days of the billing date. Late payment will accrue fees at a rate of 5% per month. Any special offers agreed upon in advance by both parties that have alternative payment terms may follow those terms. Bills may be paid in advance (before month-end) at the client's discretion. Client is responsible for any fees incurred by returned ("NSF") checks or other dishonored payment. Full payment must be made within three days after the instructor receives notice of dishonored payment or 5% will be added per month until paid in full. *Client bears the burden of reasonable attorney and collection fees incurred by Instructor in attempts to collect past due balances.*

E. **Supervision of Minors:** Minors should be supervised by an adult while on the equine facility premises other than when receiving instruction during his/her scheduled lesson time. *Instructor will not be able to supervise before/after lessons.*

F. **Helmets:** Helmets have been proven to greatly reduce, but not eliminate, the risk and severity of head injury from equine-related accidents. *All students must wear an ASTM/SEI certified helmet at all times while mounted.*

G. **Instructors:** We will always make great effort to provide the instructor of your choice, but due to the nature of this business we cannot always guarantee your instructor will be available. In the event of injury, illness, or personal reasons, your instructor cannot provide a quality lesson on any given day; *we may provide an additional or different instructor so the lesson student can continue to take their lesson for that day and time.*

III. Authorization for Medical Treatment

I grant my authorization and consent for JG Equines, LLC (hereafter "Supervising Adult") to administer general first aid treatment for any minor injuries or illnesses experienced. If the injury or illness is life threatening or in need of emergency treatment, I authorize the Supervising Adult to summon any and all professional emergency personnel to attend, transport, and treat me.

It is understood that this authorization is given in advance of any such medical treatment, but is given to provide authority and power on the part of the Supervising Adult in the exercise of his or her best judgment upon the advice of any such medical or emergency personnel.

Client Signature (including minors): _____
Parent/ Legal Guardian of Minor: _____

IV. Assumption of Risk and Release of Liability

Due to our program having multiple instructors, please sign each of our release forms.