

Sign Up Form

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Name:		
Date of Birth:	Email:	
What's your favorite thing to do with horses?		
Are you familiar with Natural Horsemanship?		
How many horses have you owned in your life	e?	
How often do you ride (times/week or times/m	nonth)?	
Do you prefer to ride English or Western?		
Have you ever competed with horses? If yes,	in what disciplines and to what level?	
Tell me about the horse you will be bringing to	o the clinic (name, breed, age, background, behavior challen	ges):
What are you hoping to get out of this clinic?		
5723, Pagosa Springs, CO 81147 or sent onli All collected money is nonrefundable 60 days	elli@soulutionsbyelli.com de out to Elli Pospischil and mailed to Elli Pospischil; P.O. Boine via Zelle to Soulutions By Elli; (970) 946-1686. prior to the event. In case of a cancellation prior to the 60 datur deposit to cover booking fees, this 10% is non-refundable.	ays

After reading and understanding above paragraph please sign:

Thank you, Elli

SOULUTIONS by Elli
For you, and your horse