

CHS Equestrian Club

Pre-Registration

Name: _____

Address: _____

Phone: _____

High School Class: Freshman____ Sophomore____ Junior____ Senior____

Home School or Alternative Education (circle) Yes or No

Number of years of experience with horses: _____

Type of experience: Farm/Ranch____ 4-H/FFA____ Gaming____ Drill____ Performance____

Other _____

Name of coach or leader_____ Phone # _____

Write a concise paragraph explaining why you would like to participate in the CHS Equestrian Club.

Send completed form to Marjorie Sager, 964 HWY 20 E. Colville, WA 99114, email to msager@colsd.org, or leave at CHS main office by August 20th. Questions? Call 684-3365.