



Lake House Stables Inc.
412 Townline Rd
Ashburn ON
LOB 1A0
www.lakehousestables.ca

Lake House Stables Rider Assessment Form

Participant Full Name: _____

Parent or Guardian Full Name: _____

Address: _____

Email Address: _____

Contact Phone Number: _____

Rider's current flat experience: No Experience/Walk/Trot/Canter (Circle all that apply, and provide brief explanation):

Rider's jumping experience: (Ex: Poles/trotting cross rails/cantering verticals/height of fences):

Best days and times for lessons:

In order to qualify for group lessons, rider must be able to demonstrate the following:

Walking, trotting and steering their horse independently

Parent or Guardian signature:

Date:

Rider signature:
