

IVY HILL THERAPEUTIC EQUESTRIAN CENTER EQUINE ASSISTED SERVICES FOR GROUPS REGISTRATION FORM

Contact info@ivyhillequestrian.org for further information



NAME _____

DATE _____

PRICING:

# of Participants (12 Max)	Number of Sessions	Session Fee
	TBD	\$25 per participant

TOTAL AMOUNT:

Payment

- ❖ Payment for the program must be received at time of service.
- ❖ Payment can be made by cash, check, credit card, or Venmo

Attendance and Cancellation Policy

- ❖ In the event the organization is unable to attend we would respectfully request at least 24 hours notice.

Please sign here that you have read and will comply with these policies:

Client Signature

Date