

## EQUINE SPORTS COUNCIL LESSON HORSE APPLICATION

Trainer/Instructor: \_\_\_\_\_

Stable Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How long have you been in business? \_\_\_\_\_ How long at your current location? \_\_\_\_\_

How many lessons are you teaching per week on average? \_\_\_\_\_

How many lesson horses do you have? \_\_\_\_\_

***Please attach a separate page for answers.***

1. Tell us about your surrounding community - demographics, rate of growth, other lesson programs (all disciplines) in your area.
2. Tell us what type/level horse you need and how it will help your program grow.
3. Tell us about your experience / background.
4. List 3 references – previous employers, clients, peers.
5. Share any other pertinent information.

Email form/responses to [media@equinesportscouncil.org](mailto:media@equinesportscouncil.org) by January 31, 2023.

Two winners will be announced by February 15, 2023.