

# Student Intake Form

## Student Information

Student Name: ..... Date of Birth:.....

Parent Name: ..... Parent Name: .....

Email (Required): ..... Secondary Email: .....

Cell Phone (Required) ..... Home Address:.....

Home Phone: ..... City/State/Zip: .....

Student Allergies or Medical Conditions: .....

## Credit Card Information

Credit Card Number:..... Type:.....

Expiration Date: ..... CVV Code:.....

Billing Zip Code:.....

In signing this form, I understand the policies for booking and taking lessons at the Painted Bar Stables. I have filled out a waiver of liability and understand the requirements of that waiver. In the case of emergency first aid and CPR certified Painted Bar Stables staff are allowed to care for the student and/or call Emergency Medical Services.

I understand that I am responsible for paying for my lessons, as well as for paying no-show fees for lessons that I miss. I authorize Painted Bar Stables to charge my credit card listed above for any fees that I incur through their no-show policy. This credit card will only be charged for this purpose. Credit card information will not be stored in digital form and will be securely destroyed after 12 months.

Signature ..... Date:.....

Printed Name: .....