



**EQUINE OWNERS AND TRAINERS BODYWORK COURSE INFORMATION**  
**April 2-4th, 2017**  
**REGISTRATION FORM**

Name:

Email:

Phone:

Address:

Profession:

Are you interested in sharing a car and or hotel with another participant?

Car

Hotel

If you are local and can help out with accommodations, please say YES here\_\_\_\_\_

Note: Unless notified otherwise we will be sharing your name, email address and phone number with other class participants to help with shared accommodations/car rental since some of you are traveling. If you do not want your information shared please say NO here. \_\_\_\_\_

Thank you for returning this form to us promptly at: [clarrouilh@gmail.com](mailto:clarrouilh@gmail.com)

THANK YOU :-)

[PROUDHORSECONNECTIONS.COM](http://PROUDHORSECONNECTIONS.COM)

