



RIDER DAYS & TIMES Fall, Winter, Spring

Mail to: CATRA, PO Box 339
Grantville, PA 17028
or

FAX to: 717-469-0095

Name _____ Date _____

Address _____ Zip _____

Phone: Home _____ Work _____

Email address: _____

Former CATRA Rider: Yes _____ No _____ Number of Years _____

Birthdate _____ Disability (if any) _____

Parent/Guardian Name _____

Registration fees of \$35 are payable twice a year: 1) Fall/Winter/Spring, and 2) Summer.
I have paid my Fall/Winter/Spring registration fee: Yes No Enclosed

DAYS AND TIMES AVAILABLE

(Please circle many possibilities to allow placement into compatible groups)

Weekly lessons run Sept-Oct and mid Jan through May. **Please see schedule for exact dates.**

| | MORNING | EVENING |
|-----------|--------------------------|-------------------------------|
| Monday | none | 4:00, 5:00 |
| Tuesday | 9:00, 10:00, 11:00 | 4:00, 5:00 |
| Wednesday | 9:00, 10:00, 11:00 | 4:00, 5:00 |
| Thursday | 10:00, 11:00 | none |
| Friday | none | none |
| Saturday | 8:30, 9:30, 10:30, 11:30 | 12:30, 1:00, 2:00, 3:00, 4:00 |
| Sunday | none | 12:30, 1:00, 2:00, 3:00, 4:00 |

I am absolutely not able to come on what dates or times: _____

\$30.00 per lesson. Lesson will be paid by: Me Sponsor: _____

We do not bill. Please arrange payment on your own. We will sign any necessary sponsor forms.