



OLD WEST SPECIAL TRAILS, INC.

Changing Children's Lives, One Ride at a Time

12280 Macon Road, Collierville, TN 38017

901-490-5555

www.oldwestspecialtrails.org

Dear Applicant,

Thank you for your interest in Old West *Special Trails, Inc.* We are very excited to have the opportunity to partner with your family.

At Old West *Special Trails, Inc.*, we believe that a horse can make a dramatic difference in a child's life. They offer companionship, teach responsibility, and instill confidence in children. Horseback riding is also very beneficial for children with special needs such as Autism and Cerebral Palsy. Our goal is to provide the financial support for children to experience the joys of horsemanship, without regard to financial, physical, or mental restrictions.

While we would love to accommodate every request, all activities are contingent upon teacher and fund availability. If you qualify for any of our programs and we are not able to accommodate your request at this time, we will place your name on a waiting list. We reserve the right to deny service to any applicant we deem necessary. Each case will be reviewed on an individual basis to ensure the safety of the applicant, instructors and horses.

Please feel free to contact us with any questions or concerns.

Happy Trails!

Old West *Special Trails, Inc.* Financial Assistance Program Application

Please place an X next to the program you are applying for below:

_____ Horseback Riding Lessons

_____ Summer Horse Camp

Applicant's Name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Do you have transportation to our facility? _____

Email Address _____

Mother's Name _____ Father's Name _____

Mother's Cell # _____ Father's Cell # _____

Applicant's Birthday _____

Emergency Contact Name and Number (s) _____

Financial Information *We reserve the right to request a copy of your tax return to verify financial information.*

Employer's Name _____

Total Household* Annual Income from All Sources \$ _____ Total Number of Dependents _____

*Household is all persons, including parents, children, grandparents, and all people related or unrelated who live in your home and share living expenses. Total Household Income is the combined income each household member received last month before taxes, including wages, salaries and tips.

Please list your dependents' names and ages on the lines provided below:

_____	_____
_____	_____
_____	_____

Photo Release

I grant to Old West *Special Trails, Inc.*, its representatives and employees, the right to take photographs of me and my property. I authorize Old West *Special Trails, Inc.*, its assignees and transferees, to copyright, use and publish the same in print and/or electronically. I agree that Old West *Special Trails, Inc.* may use such photographs of me with or without my name and for any lawful purpose including, but not limited to, publicity, illustration, advertising, and web content.

I certify that I have read the entire participant application and understand and agree with all that is stated. All information that I have provided is true and complete.

Parent or Guardian Signature

Date

Warning: Under Tennessee law an equine professional is not liable for any injury or the death of a participant in equine activities resulting from the inherent risk of equine activities, pursuant to Tennessee code Annotated, Title 44, Chapter 20. (Acts 1992, ch. 974, s6)