

**Fair Hill Therapeutic Riding Center
Family Custody Questionnaire**

Please refer to the Family Custody Policy included within this handbook. If applicable, we ask that you complete this questionnaire so that we may have accurate records and comply accordingly. To promote compliance with any existing custodial arrangements, please answer the following questions:

1. Name of Rider: _____

2. Is there a custodial arrangement in place? **YES** **NO** **(circle one)** *** If you answered no, please skip the remaining questions and sign below.*

3. Is there shared custody between parents? **YES** **NO** **Please elaborate on your answer in the space below, or attach an explanation.*

4. Please list **ALL** persons who are permitted to bring the rider to lessons at FHTRC, in accordance with the legal parameter. (List in this space)

5. Please list **ALL** persons who are permitted to pick the rider up from lessons at FHTRC, in accordance with legal parameters. (List in this space).

6. Are there any specific parameters legally outlined for direction of medical care for the rider?
YES **NO** **(Circle one)** **If "YES," please clarify in the space below, or attach an explanation.*

Please attach any documentation to this form which you feel is supportive of the information you have provided.

By signing below, I am attesting that the information I have provided is true to the best of my knowledge. I understand that if any of this information should change, I am expected to report the changes to the management of FHTRC.

Signature

Date

STAFF Signature

Date