

Name \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

What is your reason for coming to classes at Miracles in Motion? \_\_\_\_\_

\_\_\_\_\_

What do you want to learn about horses? \_\_\_\_\_

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What goals do you have for your time at Miracles? \_\_\_\_\_

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What goals do you have for this year? \_\_\_\_\_

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What life goals do you have? \_\_\_\_\_

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