

Appalachian Therapeutic Riding Center

Initial Participant Profile

Name _____ Date _____

Please provide a short written evaluation of the above named participant. This should include information about the participant's cognitive skills, physical ability, speech, special precautions, behavior, and other pertinent information. This will help the A.T.R.C. instructor to choose the appropriate horse, equipment, volunteers, and lesson content.

Cognitive Skills _____

Physical Ability _____

Speech _____

Special Precautions _____

Behavior _____

Other _____
