



Sullivan Canyon Preservation Association

EQUESTRIAN ACCESS APPLICATION

Date: _____

Contact Name: _____

Email Address: _____

Phone Number: _____

Rider Applicant Name(s): _____

Please include date of birth for children under 18 _____

Parent/Legal Guardian Name: _____

Address: _____

City: _____ Zip: _____

Your application for Equestrian Access at Sullivan Canyon Preservation Association is subject to a \$15/ year handling fee. Upon receipt of the application and fee your name will be added to the waitlist. Please note that it is imperative for you to let us know of any change in your contact information so we may keep our records up to date and be able to contact you when your name comes up on the list.

Please make checks payable to: SCPA