

Clinic Questionnaire

1. Circle one of the following categories which best describes your riding level:

- a. Beginner
- b. Novice
- c. Experienced
- d. Very Experienced

2. Circle the areas that you compete at:

- a. PRCA Rodeo
- b. Amateur Rodeo
- c. Jackpots
- d. Playdays and gaming
- e. Other _____

3. How many years have you been competing? _____

4. Does your horse run to the right or left? _____

5. How long has your horse been running barrels? _____

6. List any problems that you are having with your horse:

7. List any problems that you are having:

8. List anything that you would like to specifically learn at this clinic:

Tell me about your horse!

Name _____ Age _____

Sex _____ Breed _____

How long have you been together? _____