



17875 Birmingham Highway
Alpharetta, Georgia 30004

Phone: 770-781-3833
Fax: 770-888-9418

RIFNA Barn Application

Farm Contact Information:

Facility Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ Fax: _____
Farm Owner Name: _____ Phone: _____
Farm Contact Name: _____
Cell/Pager: _____ Email: _____

Stable License:

Licensed in State of _____ on _____ (date) License # (if applicable) _____

Farm Facility Information:

(Please understand that, all farms must carry a million dollar liability insurance policy with each school teams name listed)

Number of Horses Available for lessons: _____
Type of Barn operation (i.e.: lesson, private, sales, boarding, schooling, etc.): _____
Available Horse Trailer? Yes No Size: _____
Have you hosted shows in the past? Yes No
Number of arenas: _____ Are any arenas lighted? Yes No

(Please understand RIFNA requires every team to host a show or a meet at least once a year and, if your facility cannot then you will need to team up with other farms or rent a show facility.)

Will your farm be able to host RIFNA Shows or Meets? Yes No Yes, offsite*

*Please explain: _____

Coach's Information:

(All RIFNA coaches must be at least 21 years of age and must complete the RIFNA COACH APPLICATION. Include any assistant coaches that will be working with the RIFNA student members. RIFNA Assistant coaches must be 19 years of age, affiliated with RIFNA coach, and complete Assistant Coach Application to be in RIFNA program.)

Coach's Name: _____ DOB: _____
Disciplines Taught: Dressage Hunter/Equitation Western

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Insurance Information:

Insurance Company: _____
Liability Amounts: \$ _____ Expiration Date of current cycle: _____
Proof of insurance must be submitted with this application.

The above-information is true to the best of my knowledge, and I am applying for Barn Membership on behalf of the above-named facility.

Signature Date