

THE COMMONWEALTH OF MASSACHUSETTS

EXECUTIVE OFFICE OF ENERGY AND ENVIRONMENTAL AFFAIRS



Department of Agricultural Resources

251 Causeway Street, Suite 500, Boston, MA 02114
617-626-1700 fax: 617-626-1850 www.mass.gov/agr



APPLICATION FOR HORSEBACK RIDING INSTRUCTOR EXAM

Applicant must be 18 years of age on the date of this application. Applicant must **have completed a 6 Month Apprenticeship with a Massachusetts Licensed Riding Instructor.** The applicant must receive a satisfactory score on the written exam administered by the Department.

NAME: _____ TEL: _____

STREET: _____

TOWN: _____ STATE: _____ ZIP: _____

IN ORDER TO PROCESS THIS APPLICATION YOU MUST SUBMIT THE FOLLOWING:

- * A signed and dated letter from the instructor under which you apprenticed verifying the Dates and full Description of lessons taught.
(including the apprentice teacher's name, address, telephone and Instructor license number).
- * Copy of driver's license or birth certificate.
- * This signed application and registration fee of \$20.00 (**money order only**) payable to the Commonwealth of Massachusetts.

I certify that I have read Chapter 128, section 2A of the Massachusetts General Law www.state.ma.us/legis and 330 CMR 16:00 Rules & Regulations www.mass.gov/agr and agree to abide by them.

SIGNATURE

DATE