

# SUBMISSION TO COUNCIL FORM

## ABOUT PERSON/GROUP PRESENTING

First Name: **David** Last Name: **Ryan**

Name of Organization/Group (where applicable): **Shining Horizons Therapeutic Riding Association**

Mailing Address: **1680 Redhead Road**

City or Town: **Saint John** Province: **New Brunswick** Postal Code: **E2K1P2**

Day Time Phone Number: **506 333 0906** Email: **admin@shininghorizons.ca**

☐ If you do **NOT** wish to have your personal information (address, phone number, email) become part of the public record, please check this box.

## ABOUT YOUR SUBMISSION

Topic of Submission: **Request to present our association and progress to Common Council**

Purpose for Submission (what is the ask of Council): Updating on our Association's progress to completion of the new Therapeutic Riding Centre at 1690 Redhead Road

**Executive Summary:** Shining Horizons Therapeutic Riding Association offers horseback riding programming (equine therapy) to children and youth with, but not limited to, autism, cerebral palsy, Down syndrome and neuromuscular disorder as a source of enjoyment, therapeutic exercise, and recreational sport. Since our last visit to Common Council we have progressed wonderfully towards the completion of our Therapeutic Riding Centre at 1690 Redhead Road. We ask for the opportunity to present our association and our progress to you in the near future. Thank you in advance for your consideration.

## YOUR SIGNATURE

Signature: **David Ryan**

Date: **2019-02-06**