

RIDER REGISTRATION FORM

Mark Wonderly Clinic at Martin Downs Equestrian Center

6780 S.W. Martin Highway, Palm City, FL 34990

OCTOBER 19-21, 2012

Clinic Fees: \$220 for Part 1,2 & 3

Auditors are welcome all three days. Auditing fee of \$10/day.

Trailer-ins are welcome. Stabling is available at the rate of: \$25 per day (first bedding is provided). Stall availability is limited so please reserve early. *****A NEGATIVE COGGINS MUST BE FURNISHED TO MANAGEMENT FOR ALL HORSES PARTICIPATING IN CLINIC.*****

Ride Times: Ride times will be organized by showing level and jump height. You or your trainer will be notified of your session schedule on or near October 12, 2012.

Pre-Registration with a \$100 deposit paid by check to Martin Downs Equestrian Center is required to hold your reservation. The remaining balance of \$120 is to be paid on Friday, October 19th. \$100 deposit is nonrefundable, unless your space can be filled by another rider. Riders will ride in groups of no more than 4 riders for a 1 ½ hour session on Saturday and Sunday. Friday evening at 6:00 PM, we will hold the Reading of the USEF Rules and a Pot Luck Dinner at the Clubhouse. We kindly request attendees bring a dinner item or dessert to share.

Rider Registration Form and deposit check are due by October 1st, 2012. REGISTER SOON WHILE THERE IS AVAILABILITY! Please mail to: Nancy Dunn 4600 SW Greenridge Street, Palm City FL 34990

RIDER INFORMATION

Riders Name (Last, First, MI) _____ Age (if Junior) _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

Trainers Name _____

Please indicate your showing level (height or division name): _____

Please indicate your preferred jump height for this clinic: _____

I Will / WILL NOT (circle one) REQUIRE STABLING. If needed, how many stalls? _____

Signature (Juniors must have parent sign): _____

Feel free to contact Stacie Sprague (call or text 803-617-9042, email: deister78@hotmail.com) or Nancy Dunn (call or text 772-486-1038, email: oakhaven2003@aol.com) with any questions related to clinic registration and/or participation.

Martin Downs



Equestrian Center

Martin Downs Equestrian Center

6780 SW Martin Hwy

Palm City, FL 34990

772-220-8337

Release Waiver and Hold Harmless Agreement

The undersigned assumes the unavoidable risks inherent in all horse-related activities, including but not limited to the following:

-That the horse may behave in ways that may result in injury, death, or loss to persons on or around equine.

-The equine is unpredictable and may react to sound, sudden movement, unfamiliar objects, persons or other animals.

-The equine may cause injuries because of the surface and subsurface conditions on which they are ridden.

-An equine injury may cause injury by colliding with another equine, people or objects.

-The injury may be caused to you, your horse or your property while participating in an equine activity because another participant may not maintain control of their animal.

The inherent risks include but are not limited to bodily injury and physical harm to horse, rider, and spectator. In consideration, therefore, for the privilege of riding, boarding, and/or being around horses, the undersigned hereby agrees to Hold Harmless and Indemnify the **Martin Downs Equestrian Center** and further release them from any liability or responsibility for accident, damage, injury, or illness to the undersigned or to any family member or spectator accompanying the undersigned on the premises.

WARNING

Under Florida Law, an equine activity sponsor or Equine Professional is NOT liable for an injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities.

Print Name _____ Date _____

Address _____

Phone # _____ Email _____

Signature _____

Signature of Guardian(if Under 21) _____ Print Name _____