**WINTER SHOW HORSE CLINICS**

**WERRIBEE NATIONAL EQUESTRIAN CENTRE**

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| Saturday August 22nd |

**Instructors:**

**Dale Plumb: Dale really needs no introduction. Dale has been one of the leading producers of show horses. He has a wonderful eye for a wonderful show horse and proof of this can be seen by looking at horses with the “DP” prefix.**

**Dale is now taking a back seat and passing on his knowledge to his two little girls Daizi and Poppy who both share his love for the show ring.**

**Dales accolades in the show ring are to many to list. Grand Nationals Titles, EA Nationals Titles, Royal Title. Along with assisting other riders with the basics of Off the Track horses to Royal/National level.**

**Justine Greer: Justine started her riding life in the show ring at a very young age. Winning at royal level in rider classes and open. Recently winning Champion at royal level in 2009. Justine has been competing and training at FEI level for many years now and has spent time training overseas. Justine trains riders in dressage and in showing including Grand National Champions.**

**Justine has trained many young horses and Off the track horses over the years and is happy to assist all ages and levels.**

**Cost per lesson $50 (+ $16 Facility fee per horse for the day)**

**Option to have two lesson 1 in AM and 1 in PM**

**2 or 3 riders per lesson, based on availability**

**Phone Jodie van Breugel on 0419800946 with any questions after 5pm and email complete forms to [Jodie.vanbreugel@gmail.com](mailto:Jodie.vanbreugel@gmail.com)**

There will be a BBQ lunch provided with a Gold coin donation with proceeds going to the

Equestrian Victoria Show Horse Team 2015



**Winter Show Horse Clinic**

Rider Name:

EV Membership Number:

Address:

Telephone: Mobile:

Email:

Age of Rider:

Rider Experience (Please Circle) **Beginner Intermediate Advanced**

Horses Name:

Horses Registration Number (if EV Registered)

Size (Please Circle) **Pony Galloway Hack**

Horses experience (Please Circle): **Newcomer Intermediate Seasoned**

**Please select which date you would like to participate:**

**Saturday August (AM/PM)**

Additional Comments:

**Payment (facility fee only) $16.00 per day:**

I will be arriving on \_\_/\_\_/2015 and departing on \_\_/\_\_/2015.

I enclose a cheque / money order for $\_\_\_\_\_\_\_\_\_ payable to Equestrian Victoria

OR I authorise payment of the amount above to be debited from my credit card as follows:

Credit Card type (please tick): VISA Mastercard

Card Number: \_\_ \_\_ \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

Expiry Date: \_\_\_\_ / \_\_\_\_

Card Holder’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Quality instruction by EA/NCAS instructors in a very safe environment.

 Cancellations without receipt of a medical/vet certificate will forfeit 50% of the entry fee. All cancellations must be made in writing 48hours before clinic to be eligible to receive a refund minus an admin fee.

 **LIMITED SPACES AVAILABLE**

 Times will be forwarded prior to the clinic – please provide mobile number for text

 Stables, yards & sites can be Booked through WPNEC- 03 9741 7672 www.wpnec.com.au

 Please advise of any special requests, eg preferred time due to travelling etc. Every effort will be made to accommodate however, no guarantee can be given.

 **Riders must be current Equestrian Australia members**

 **Waiver must be signed for consideration into the Clinic**

 One form per person per horse. Please note the waiver attached must be signed.

**This waiver must be signed before application can be considered:**

In consideration for being permitted to participate in any way in horse sport activities, I, the undersigned, understand, acknowledge and accept that: Horse Sports are a dangerous activity and horses can act in a sudden and unpredictable (changeable) way, especially if frightened or hurt. There is a significant risk that serious **INJURY** or **DEATH** may result from horse sport activities.

I understand and acknowledge the dangers associated with the consumption of alcohol or any mind altering drugs. I agree not to drink alcohol or take drugs prohibited by law before or during any horse sports activities.

I agree to follow the directions of the Show Horse Coordinator and instructors and understand that any misconduct or refusal by me to follow any direction can result in the **CANCELLATION** of my participation in the activities and immediate removal from my horse **NO MATTER** where that may occur.

I agree to wear an approved helmet at all times whilst participating in the sport where this is required under the relevant EA and FEI Rules and Regulations.

I fully understand the above terms and sign it freely and voluntarily.

Signature of Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dated: \_\_\_\_ /\_\_\_\_ /\_\_\_\_

**For Participants of Minority Age (Under 18 years)**

This is to certify that I, as a parent/guardian with legal responsibility for this participant, acknowledge, understand and accept ALL OF THE ABOVE and consent and agree to my minor child’s involvement or participation in the Show Horse Clinic.

Full Name of Responsible Guardian/Parent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Guardian / Parent\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dated: \_\_\_\_/\_\_\_\_/\_\_\_\_