



Western Dressage Clinic with Joann Williams

When May 2 and 3, 2020

Registration Open Date: March 1, 2020

Closing date: April 15, 2020

Where Brecksville Stables, 11921 Parkview Drive, Brecksville, Ohio 44141

What Western Dressage Clinic

Facility Clinic rides will take place in the indoor riding arena, stabling available, trails available

Cost 45 min. Private Lessons, NODA & CADS Members: \$125.00/per ride Non-Member: \$150.00/per ride

One hour semiprivate, NODA & CADS Members: \$75.00/per ride Non-Member: \$100.00/per ride

Stabling \$25 each day the horse is on the premises, 1 bag of bedding and overnight included

Auditing: \$10.00 a day at the door; please bring a chair

Light refreshments available for sale onsite – lunch is NOT provided

REGISTRATION FORM

(Please print and mail form below with payment in full to reserve your clinic rides)

Name _____

Address _____ **City** _____ **State** _____ **Zip** _____

Phone _____ **Cell** _____ **E-mail** _____

Horse Name _____ **Western Dressage Level(s)** _____

Private Clinic Ride/member _____ **May 2** _____ **May 3** _____ **Total** _____

Private Clinic Ride/non-member _____ **May 2** _____ **May 3** _____ **Total** _____

Semiprivate Clinic Ride/member _____ **May 2** _____ **May 3** _____ **Total** _____

Semiprivate Clinic Ride/non-member _____ **May 2** _____ **May 3** _____ **Total** _____

Stabling: arrival date _____ **Number of days** _____ **X \$25 =** _____ **Total** _____

Extra bedding and night check contact Halle Clause separately **TOTAL DUE:** _____

Payment and Refund Policy: Payment for clinic rides and stabling are required with registration to reserve clinic rides by the April 15 closing date. Clinic rides cancelled by the rider before the closing date of April 15 are subject to a full refund minus a \$50 administrative fee. No refunds will be issued for any reason for clinic rides or stabling cancelled after the closing date of April 15 *except a refund in the case of a verifiable medical reason or emergency and the filling of the cancelled rides from a waitlist, less a \$50 administrative fee.*

Please Make Check Payable To: Northern Ohio Dressage Association (or NODA)

Mail Check To: Western Dressage Clinic c/o Halle Clause 430 Archdale Avenue, Cuyahoga Falls, OH 44221-2206

Questions & Clinic Contact: NODA Western Dressage Liaison Halle Clause 330-472-0888 or westerndressage@nodarider.org

WAIVER OF LIABILITY AND ACKNOWLEDGEMENT OF FINANCIAL RESPONSIBILITY: Riders, auditors, and volunteers will be required to sign a waiver of liability by NODA and CADS. Rider/owner will accept full responsibility for themselves and the horse regarding risk of injury. Rider/owner will abide by all facility and clinic regulations.

Rider's Signature _____ **Date** _____

Owner's Signature _____ **Date** _____

***** Proof of Negative Coggins within one year of clinic date and vaccination record required with application. *****

***** An ASTM/SEI Certified helmet must always be worn when mounted. *****

www.NodaRider.org