**Rider name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Highest level you have competed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Level requested: Poles/cross rails Starter (2’3”) BN (2’7”) Novice (2’11”) Training (3’3”) Prelim (3’7”)

Emergency contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship of above: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency contact phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Horse name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Highest level competed/experience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Horse age: \_\_\_\_\_\_\_\_\_\_\_\_

Breed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Horse sex: \_\_\_\_\_\_\_\_\_\_\_\_ Horse color: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Note*:*** *Prepayment in full is required by the clinic sign-up close date, October 7, 2019*

*Schedule will be sent out by email soon after closing*

**$175 Saturday & Sunday, (XC and Stadium), small groups**

**$90 additional private lessons**

**$25 stabling per night (limited availability)**

**Method of payment:**

**Checks:** Payable to Always August Farm

**Venmo:** @alwaysaugustfarm

Clinic spot guaranteed only with payment in full by the closing date. If the number of fully completed and paid applications received prior to the closing date should exceed the number of slots available for riding and auditing applications, slots will be filled in the order of marked receipt by post mark or email date. A refund of payments rendered minus a $25.00 administration fee is available only if written notice is acknowledged and certified as received by Always August Farm before the closing date, otherwise there will be no refund.

The release of liability waivers can be downloaded from [www.alwaysaugustfarm.com](http://www.alwaysaugustfarm.com)

This form is required before a rider or auditor is allowed to participate in the clinic. By completing and submitting this form I agree that I have read, understand and agree to comply with the information expressed herein. I also agree that as a condition of and in consideration of acceptance of entry, Always August Farm and/or publicity agents of the event may use or assign photographs, videos, audios, cablecasts, or other likenesses of me and my horse taken during the course of the eventing clinic educational clinic for the promotion, coverage or benefit of the competition and sport. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to compensation, invasion of privacy, right of publicity, or to misappropriation.

**Signature required:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Parent if under 18 years of age:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_