



Captain Mark Phillips Eventing Clinic March 16-17, 2013

Rider's Information

Name:		Age:
Address:		
City:	State:	Zip:
Contact Phone:	Email address (clearly, please!)	

Horse's Information

Horse's Name:	Special Stabling Requests: reserved indoor stall available@\$25
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Clinic Information

		Participation: check one	Fees:	Total:
Tulipsprings Eventing Kennewick, WA www.tulipsprings.com		Riding	Clinic <i>including stabling</i> : \$395 total Reserved indoor STALL vs. Paddock: add \$25/weekend (Non-clinic riders) \$20 per day	Indicate Amount Enclosed:
		Auditing		
		Dog Fee	\$50 per dog	
				Make checks payable to: Tulipsprings, LLC

Experience

Maximum height you are comfortable jumping, level of experience and other information regarding goals, issues, etc. Please include highest level competition *completed* with this horse.

Please check below the level that you are most competent at with THIS horse:

BN Beginner Novice
 N Novice
 T Training
 P Preliminary
 I Intermediate
 A Advanced

Release

I understand that riding horses is a high-risk sport and I am participating at my own risk. I hereby assume this risk and further do hereby release and hold harmless the organizer, instructors, agents, volunteers and hosts of this Clinic and the owners of any property on which the Clinic is to be held, from all liability for negligence resulting in accidents, damage, injury or illness to myself or my property, including the horse I am riding at the Clinic.

Name (Please print):	Date:
Signature:	

**Please return completed form, release, and your check payable to Tulipsprings, LLC:
Carol Curry, 412 East 36th Ave., Kennewick, WA 99337
(This is not the facility address!!)**

**Open date is January 8, 2013, and refund deadline is February 12, 2013.
After Deadline, no refunds unless place is filled**

PLEASE INCLUDE A SIGNED RELEASE FORM FROM THE TULIPSPRINGS WEBSITE
http://www.tulipsprings.com/rules/docs/Tulipsprings_Release.pdf