



DRESSAGE QUEENSLAND STATE COACH Carlos De Cleermaecker Clinic Booking Form



Date of Clinic: _____

Venue: _____

Please Note- to secure your lesson, this form, all monies MUST be received with a signed riding disclaimer form. This clinic is being SUBSIDISED by DRESSAGE QLD. Stabling to be booked on this form, but paid cash on the day to venue owner/organiser. Cheques to be made out to Dressage QLD.

Note also, lessons are of 40min duration. Preference will be given first to State Squad riders (approx 75%), then to EA NCAS Coaches and Judges (approx 15%), then EA official trainers and riders (approx 10%). If times are available, a lesson/day will be allocated to each rider. Second horses will be placed on reserve list. Please note- entrance to this clinic will be allocated with the above formula. Entries for each clinic **close 2 weeks prior** to clinic start date. Lesson places after close date will be allocated in order of receipt. An ordered reserve list will be taken.

NOTE: 2010 QLD ELITE/HIGH PERFORMANCE SQUAD RIDERS - Are allocated 2 free lessons/year (*Festival subsidised lessons*). Subsequent lessons must be paid for with this form at DQ subsidised rate below. These lessons are not transferable to other riders. Non-Squad horse lessons are \$110. 2010 YR SQUAD - Are allocated 1 lesson/year YR Sub-Committee subsidised lesson at \$85 (*squad horse*) and lessons thereafter are \$90.

Fence sitters are welcome, a charge of \$10 per person, per day to be paid on the day.

Refund Policy:

In the event of a cancellation, a \$25 per lesson administration charge will be withheld. If no rider is found to take the spot, full amount will be non-refundable. Please see FAQ's on State Coach Page for details.

EA Member Dangerous Activity Acknowledgement

ACN 077 455 755 ABN
19 077 455 755

Full Name of participant (and of guardian if under 18 years).....

Address.....

StatePost Code.....Date of Birth.....

Name of Club/Organisation.....

Membership No.

Address of Event / Activity.....

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 and 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 any event organiser or official and that any misconduct or refusal by me to follow any direction of any organiser or official can result in the **CANCELLATION** of my participation in the activities and my 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 EFA and FEI rules and regulations.

I have had sufficient opportunity to read this Dangerous Activity Acknowledgement and fully understand its terms and sign it freely and voluntarily.

Dated: ___/___/___ Signature of rider _____

For Participants of Minority Age (Under Age 18)

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 horse sport activities.

Dated: ___/___/___ Signature of guardian _____

State Squad Member: yes/no	EFA Coach: yes/no	EFA Judge: yes/no
Rider's Name:		Coach/Judge Level:
Level of Horse (and name):		Level of Rider:
Lesson Days (one lesson/day/rider) :		
Preferred ride times (if possible):		
Days Stabling/Yard required:		(\$20pd stable, \$10pd yard) - Pay on Day
Lesson Costs	\$90 Squad Rider (Squad Horse)	\$85 YR Squad (Squad Horse/1 Lesson Only)
EACH	\$110 Judge/Coach/Squad Rider (Non-Squad Horse)	\$120 Official EA Rider
Total Money enclosed: _____ cheque to DQ(no money, no lesson booked)		

Postal Address: _____

Email Address (Must provide for times): _____

Rider's Phone Number: _____ Mobile: _____

Rider's EA number: _____

Mail Deposit and forms to: DQ State Coach Clinic - c/- Leasa Stephen, 198 Kobble Creek Road, Kobble Creek 4520. **Queries call:** 0412 753 512 **email:** leasa@gypsielodge.com.au