

SWVADA Dressage/Biomechanics of Riding Clinic
Priority given to SWVADA members who have completed volunteer hours 2022
August 13 and 14, 2022

(One horse per entry form please-copy as needed)
AUDITING IS FREE FOR SWVADA MEMBERS, \$25 FOR NONMEMBERS

Clinician: Jessica Bortner-Harris
Event Managers: Laura Nelson: galliard.laura7@gmail.com 2578 Childress Rd., Christiansburg, VA, 24073
*send entry to: Judy Altizer: springhollowfarm@me.com 1409 High Rock Hill Rd, Pilot, VA 24130

Location: **Alphin-Stuart Livestock Arena, 500 Plantation Rd. Blacksburg, VA 24060**

Horse: _____ Owner: _____

Gender of Horse (please circle): Stallion Gelding Mare

Rider: _____ Phone: _____

Address: _____

Email: _____

SWVADA member? Yes _____ No _____

**Fees: This clinic is subsidized by SWVADA with a grant from the Virginia Dressage Association.
Each individual rider must submit an entry form.**

Make checks payable to SWVADA.

No refunds will be issued unless ride time can be filled. Entry must include a signed entry form, payment, and copy of current negative Coggins. All horses on grounds must show proof of negative Coggins or entry will be denied.

Mail entries to event manager Laura Nelson

Clinic Fee (please check one):

_____ **SWVADA/VADA Members Private (\$35)**

_____ **Non-Members Private (\$75)**

SWVADA membership: Individual dues \$50, Junior/YR dues \$30, Family \$33 for each additional family member

Late Fee (\$10.00 if entry is received after closing date) \$ _____

Total Enclosed \$ _____

Please specify the level at which you would like to work as well as any training problems or concerns you would like to address. List any partners that you would like a semi private lesson with for scheduling purposes.

I agree that I participate voluntarily in this clinic fully aware that horse sports and this clinic involve inherent dangerous risk. By participating, I expressly assume any and all risk of injury or loss suffered during or in connection with the competition. I further understand that neither the organizers, property owners, sponsors, volunteers, employees, nor the organization/clinician accept any responsibility for accidents, damage, injury, death, or illness to horses, owners, riders, employees, spectators, or any other persons in connection with this competition.

Rider's Signature: _____

*Parent/guardian must sign if rider is under 18 years of age

Unvaccinated riders/auditors should practice social distancing and follow public health guidelines