

Rider Application Form: Fix-A-Test/Riding Clinic
April 1, 2017 - Cedar Creek Stables

Name: _____ Email: _____

Phone: _____ Current VADA-CH Member? ___ Yes ___ No

Name of Horse: _____ Age: _____ Sex: _____

Breed: _____ Date of Negative Coggins: _____

Check A or B:

A. ___ I would like to take a lesson

B. ___ I would like to ride the following test: _____

ridden: _____ (Example: First Level, Test 3)

Preference for ride time: ___ AM ___ PM

Interested in stabling during the clinic? _____ Yes _____ No
(\$30 a day, including bedding, paid to Cedar Creek Stables on day of Clinic)

A complete application package consists of:

- Rider Application Form
- VADA-CH Liability Release
- Cedar Creek Stables Liability Release
- Current Negative Coggins
- Check made out to VADA-CH for \$75 (for members) \$85 (Non-members)

Mail application package to: Jan Templeton, 585 Graves Mill Rd, Madison, VA 22727

Early registration is encouraged to ensure acceptance.

Direct questions to: streatorhill@outlook.com