



# KEYSTONE EQUINE ENTERTAINMENT AND TRAINING ALANIAN RIDERS



## CLINIC REGISTRATION FORM

Thank you for your interest in registering for the trick riding and Cossack riding clinic. Please return this form and your \$100 non-refundable deposit to register for the clinic. Registrations will be accepted until January 10. We look forward to having you at the clinic and are committed to making it a memorable learning experience. Call 814-215-7171 or email keystoneequinetraining@gmail.com for more information.

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone Number \_\_\_\_\_

**Please place an x in front of the option you are choosing.**

- January 12-14 = \$400
- January 19-21 = \$400
- Both weekends = \$700
- Spectator = \$25 per weekend (Each participant may bring one spectator for free.)



**For participants only:** (Please check all that apply and complete information)

- Male
- Female

**For all participants:** Height = \_\_\_\_\_ Weight = \_\_\_\_\_ (This information is needed to match riders to horses.)

\* Clinic will not be cancelled due to inclement weather.

**Return your \$100 non-refundable clinic deposit and this registration form to:**

Keystone Equine Entertainment and Training LLC  
Attn: Ashley Pletcher  
8010 41<sup>st</sup> Avenue E  
Bradenton, FL 34211

**Make checks payable to Ashley Pletcher**

Under Pennsylvania and Florida laws, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in equine activities resulting from the inherent risks of equine activities, pursuant to the Equine Activity Act. I hereby assume as my personal risk all the hazards and dangers of handling and/or riding horses and all associated activities. I release Keystone Equine Entertainment and Training LLC/Ashley Pletcher, Lev Gigolaev, their family, employees, associates, heirs, and guests from any liability of any kind for injury or damage that may befall me or my property while participating in this horse activity.

Signature of Participant \_\_\_\_\_

Guardian Signature if a minor \_\_\_\_\_ Date \_\_\_\_\_