

KEYSTONE EQUINE ENTERTAINMENT AND TRAINING
CLINIC REGISTRATION FORM (ST. CLOUD, FLORIDA)

Thank you for your interest in registering for an Ashley Pletcher Clinic. Please return this form and your registration fee (\$125) to register for the clinic. Registrations will be accepted until November 15. We look forward to having you at the clinic and are committed to making it a memorable learning experience. Call 317-650-1159 or email jenniferforthman@yahoo.com for more information.

Name _____ Age _____

Address _____

City _____ State _____

Home Phone Number _____ Cell Phone Number _____

Email _____

Emergency Contact _____ Phone Number _____

* Clinic will not be cancelled due to inclement weather.



Clinic will be held at 2851 Kissimmee Park Road St. Cloud, FL 34772. All horses and equipment will be provided. All participants can bring two spectators for no extra charge. Each additional person is \$10. Please bring your own chairs for any spectators. Please wear stretchy clothing and sneakers for the day. Helmets can be provided or you are welcome to bring your own.

Return your clinic deposit and this registration form to:

Jennifer Forthman
Attn: Ashley Pletcher Clinic Registration
2851 Kissimmee Park Road
St. Cloud, FL 34772

*****Make checks payable to Jennifer Forthman**

Under Florida law, 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 Florida's Equine Liability Statue Chapter 773. 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, Jennifer Forthman, their families, 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 _____