



Attend a Clinic ...

help save a horse!

This one-day Relationship Riding clinic will help benefit
"Performance Standardbred",
a non-profit organization dedicated to supporting retired harness racing horses
while they await placement in their new homes.

Relationship Riding is a step forward in the evolution of horsemanship.
This clinic is a great opportunity to discover the magic of equine leadership
and experience a deeper connection with your horse
than you have ever imagined.

Date: Saturday, June 12, 2010
Time: 9 - 4 (bring your lunch)
Place: AG Arena in Cochrane
Cost: Performance Standardbred members: \$125/participant
Non-members: \$145
Auditor fee: \$25

Barbra-Ann King, founder of the Relationship Riding technique and
author of "*Opening to Consciousness with Relationship Riding*"
will be signing books at the end of the clinic (books will be available on site).
www.relationshipriding.com

Spots are limited. Book early by contacting Lonnie at

lanfal@telus.net

www.p-standardbreds.org

Performance Standardbreds

Event Registration

Event: 1 Day - Relationship Riding Clinic – Barbra-Ann King	Date: June 12 th , 2010 9:00am – 4:00pm
Clinic Cost: <u>Performance Standardbreds members:</u> Full Day with Horse \$125.00 <u>Non-Members:</u> Full Day with Horse \$145.00 <u>Auditor Fee:</u> \$25.00 Maximum Students with horses 12	Location: Cochrane Ag. Society Cochrane www.cochraneagsociety.ca

Description:
Relationship Riding is an exciting step forward in the evolution of horsemanship. This unique riding/training technique is based on how we first started riding horses many centuries ago, challenging conventional techniques by embracing the philosophy of no pain, fear or discomfort for the horse.

Based on techniques centuries old, Relationship Riding© demonstrates how a strong relationship based on trust, respect, honesty and love can help you achieve your equine goals no matter how big or small. The secret lies in being a good leader based on what horses need to see in a leader, not what humans assume they need.

Agenda:
The day starts with a short talk where I introduce and explain the philosophy and why it works. Then I do a short demo on the ground. Following that each participant comes in with their horse to practice the ground work and establishes themselves as their horse's leader. After lunch, we get into the riding part. Again, I do a short demo including saddle fitting and then participants ride. Everyone gets individual attention and instruction as well as a saddle fitting.

Please refer to www.relationshipriding.com for more information

Directions: <http://www.cochraneagsociety.ca/MaptoAGgrounds.pdf>

Notes: As written, plus "any level of horse/rider is encouraged to participate, horses however, must be safe and suitably mannered in an arena environment with other horses.

Your name _____ Telephone Number _____
Email: _____ AEF # (Mandatory) _____

*Optional Information :
*What do you hope to cover during clinic: _____
*Please provide some information about your horse _____
*Breed _____ Sex _____ Age _____
*Previous Experience (Yours) _____

Payment: Please make cheque payable to Performance Standardbreds. All payment must be received prior to clinic. Cheques can be mailed to : Performance Standardbreds 40 Robinson Road, Calgary, AB T3Z 3K6

Waiver: * Must be signed by participant or Parent/Guardian
I understand that neither the Cochrane Ag. Society nor the Performance Standardbred Group or affiliates are liable for damage, accidents, injury of illness to the horses, owners, employees, or dependants, spectators, or any other person or property in connection with this event. I hereby agree for myself and my representatives that I make this entry at my own risk.

Signed _____ Dated _____
Participant

Signed _____ Dated _____
Must be signed by Parent or Guardian if Participant is under 18.

Please complete and sign this registration and mail it with your cheque to the above mentioned address.

PERFORMANCE STANDARDBREDS

ACKNOWLEDGEMENT of RISK and RELEASE of LIABILITY “For Participants 18 and Older”

Event: _____ Date: _____

Facility: _____

Participants Name: _____ Date of Birth: _____

Address: _____ City: _____ Prov: _____ Postal: _____

A.E.F. Membership Number: _____

Individual must READ and UNDERSTAND prior to participating in Equine Events and Activities

The following waiver of all claims, release from all liability, and assumption of all inherent risks and other terms of this agreement are entered into by me the Participant with and for the benefit of PERFORMANCE STANDARDBREDS ORGANIZATION, its directors, officers, employees, volunteers, officials, business operators and site property owners. (all of them collectively called the “Host”)

Initial each item below AFTER READING and UNDERSTANDING the item

- ___ 1. **I Understand** there are inherent Dangers, Hazards and Risks, (collectively called Risks) associated with Equine Events and Activities and injuries resulting from these “**Risks**” are a common occurrence while participating in Equine Events and Activities.
- ___ 2. **I acknowledge** that the Inherent “Risks” of Equine Events and Activities means those Dangerous conditions which are an integral part of Equine Events and Activities, including but not limited to:
 - a. The propensity of any equine to behave in ways that might result in injury, harm or death to persons on or around them and to potentially collide with, bite, kick another animal, people or objects
 - b. The unpredictability of an equine’s reaction to such things as sounds, sudden movement, tremors, vibrations, unfamiliar objects, persons or other animals and hazards such as subsurface objects.
 - c. The potential for other participant (s) to act in a negligent manor that might contribute to injury to themselves or others, such as failing to act within their ability to maintain control over an equine.
- ___ 3. **I Freely Accept and Fully Assume ALL Responsibility** for the Inherent “Risks” and the possibility of personal injury, death, property damage or loss resulting from the participation in Equine Events and Activities.
- ___ 4. **I Acknowledge** that it remains my Sole Responsibility to ensure my own safety and participate within my own limits.

Please Initial ___

___5. **In addition to consideration given for my Participation in Equine Events and Activities**, I and my heirs, executors, administrators and assigns (collectively called my "Legal Representatives") agree

- a. **To Waive All Claims** that I might have against the **"Host"**; and
- b. **To Release the "Host"** from Any and All Liability for any loss, damage, injury, or expense that I, or my "Legal Representative" might suffer as a result of my Participation due to any cause including any Negligence on the part of the **"Host"**; and
- c. **To be liable for and to Hold Harmless and Indemnify the "Host"** from all actions, proceedings, claims, damages, costs demands and liabilities of whatsoever nature or kind arising out of or in any way connected my participation in Equine Events and Activities.

I confirm that I have had sufficient time to read and understand each term in this waiver in its entirety, and have agreed to the terms freely and voluntarily. I understand that this waiver is binding on me and my Legal Representatives against the "Host".

SIGNED This _____ day of _____ 20_____

I agree I have read and will abide by the rules and regulations of the show.

(Signature of Participant)

Print Name of Witness to signing and initialing

(Signature of Witness)