



Rider Registration Form

Melanie Smith Taylor Clinic

October 30-31, 2010

Plantation Equestrian Center

Rider Name: _____ **Horse Name:** _____

Address: _____ **City/State/Zip:** _____

Phone: _____ **E-mail:** _____

To help us inform the clinician of your level of riding and goals for the clinic, please answer the following questions:

1. What level of competition have you successfully competed in? (local, A, B, C): _____

2. What classes/divisions have you and your horse successfully competed in? (Child/Adult Jumpers, Amateur Hunters, etc.) _____

3. What fence height are you and your horse most comfortable at? (i.e. 2'6", 3'-3'3", etc.): _____

4. What do you hope to accomplish in this clinic? _____

5. Please state any additional information that you think may be helpful to the clinician. _____

Tentative Schedule- Please check session(s) you would like to enter:

Saturday:	8:00 am	3'	_____	Sunday:	8:00 am	3'3" and above	_____
	10:30 am	2'6"	_____		10:30 am	2'6" – 2'9"	_____
	1:00 pm	3'3" and above	_____		1:00 pm	3'	_____

Cost: \$260 per session

Includes stall and schooling. Bedding is provided by the facility at \$7 per bag. Each rider will be granted two tickets for auditors, including parents and trainers. Checks made payable to Heritage Equestrian Productions.

Clinic fees must be paid in full at time of registration. Fee is non-refundable once reservation has been made. If unable to attend, you may sell your spot or we may be able to offer refund if we fill the spot. Please send registration form to **Heritage Equestrian Productions 4601 SW 74th Terrace Davie, FL 33314**. For questions and information, contact Butch Medlin by e-mail at Heritagehorsesho@aol.com or call 954.347.1799 or visit www.heritagehorseshow.com.

Please submit registration form with USHJA Liability Form (available on our website).