

**WNYDA Pro Bono Junior/Young Rider Clinic**  
**Houghton College Equestrian Center**  
**Saturday August 7, 2021, 9:00 a.m. – 5:00 p.m.**

Registration Opens: July 7, 2021      Registrations Close: August 4, 2021

**Registration:** To reserve a spot, include a check for \$25 rider deposit fee (to be returned at clinic check-in) and/or \$5 audit fee made to WNYDA.

**Mail to:** Sarah Averill, 27 Milford St, Buffalo, NY 14220 / (716) 400-8126 / [sarahlorax@gmail.com](mailto:sarahlorax@gmail.com)

Email registrations are accepted, but a check to hold spot must be received within 48 hours!

Name \_\_\_\_\_ Age as of 1/1/2021 \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian name: \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

CHECK ONE: RIDER (\$25 refundable deposit) \_\_\_\_\_ AUDITOR (\$5 Fee) \_\_\_\_\_

Ride Time Preference (AM or PM) - Check One: AM \_\_\_\_\_ PM \_\_\_\_\_

Name of Instructor you currently ride with \_\_\_\_\_

List any previous dressage experience or education: \_\_\_\_\_

\_\_\_\_\_

*All lessons are 45 min privates. Riders will be assigned a lesson time as close to your preference as possible. All riders must be a minimum of 8 years old and able to walk, trot, and steer independently.*

*Limited number of stalls available for \$30 for the day. Send separate \$30 check made to "WNYDA" to reserve a stall. Stall fee is non-refundable; provide your own bedding and stall must be stripped before you leave.*

*Complimentary beverages & baked goods available at the clinic for participants & registered auditors. Lunch may be purchased at the Subway, 3 Bums Pizza, or China Star restaurants in town in Houghton. WNYDA logoware will also be available for purchase at the clinic.*

*Upon clinic arrival your registration fee check will be returned to you. If due to illness or injury to you or your horse you must cancel your lesson, a written statement from your doctor or veterinarian must be received at least 48 hours prior to the clinic in order for your registration check to be returned to you. If you do not show up for your lesson and do not follow the above described process, your registration check will be considered a donation and will be put into WNYDA's Education Fund.*

**RELEASE OF LIABILITY MUST BE SIGNED AND DATED – PLEASE READ BEFORE SIGNING!**

**RELEASE OF LIABILITY – PLEASE READ BEFORE SIGNING**

It is understood and agreed that as a condition of riding in or auditing this clinic, that the undersigned, each and all, assume any and all risks of injury and loss, release and hold harmless, and indemnify the Western New York Dressage Association, LTD, staff, volunteers and associates, the organizer, the organizing committee, the instructors, all volunteers, the host and property owners, from legal and financial liability for injury or damage to any horse, rider, family member or spectator. The Release from all legal and financial responsibility is made willingly by the undersigned, from any loss, liability, damage or costs, including court costs and attorney’s fees, that may incur due to my participation in or attendance at said activity, or otherwise, whether or not injury or loss result directly or indirectly from the negligent acts or omissions of the Western New York Dressage Association, LTD, its staff, volunteers or associates, the organizer, the organizing committee, instructors, all volunteers, the host and property owners (Houghton College). The undersigned does hereby waive, release, and forever discharge the Western New York Dressage Association, LTD, its staff, volunteers or associates, the organizer, the organizing committee, the instructors, the host and property owners (Houghton College). I agree that I will never prosecute or in any way aid in prosecuting any demand, claim or suit against the Western New York Dressage Association, LTD, the instructors, the volunteers, nor the property owners (Houghton College) for any loss, damage, or injury to my person, persons, horses, or property that may incur from any cause whatsoever as a result of taking part of this activity.

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RIDER OR AUDITOR SIGNATURE DATE

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PARENT SIGNATURE (parent or guardian if rider or auditor is under 18) DATE

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OWNER OR AGENT SIGNATURE DATE  
*(Adult responsible while on ground for horse ridden in clinic)*

