

# Pilates for the Dressage Rider with Janice Dulak

An Educational Event sponsored by the Nebraska Dressage Association – April 20–22, 2018

## PARTICIPANT APPLICATION

### PARTICIPANT INFORMATION

Name \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

NDA Member?  Yes

No, but I included a membership form and check with my application

No, I'm not interested in becoming a member

### HORSE INFORMATION *(leave blank if applying for mat class only)*

Horse's Name \_\_\_\_\_

Age \_\_\_\_\_ Breed \_\_\_\_\_

### I WANT TO APPLY TO PARTICIPATE AS:

Mat class AND Mounted Session Participant (\$195)  
*Both Saturday and Sunday; limited mounted sessions available*

Mat class ONLY Adult Participant (\$75)  
*Both Saturday and Sunday*

Mat class ONLY Junior Participant (\$50)  
*Both Saturday and Sunday*

### ADDITIONAL DETAILS

Lecture and dinner will be 6:30–8:00 pm Friday at Firespring. Mat classes run from 9:00–11:00 am on Saturday and Sunday morning at Still Waters. Please bring your own yoga/pilates mat to work from. Semi-private mounted lessons will begin at noon and last one hour per group. A light lunch will be served each day; please pre-register. Snacks and refreshments provided.

### SELECTION CRITERIA

Horse/rider combinations will be accepted on a first-come, first-served basis. We are limited to 10 horse/rider combinations for mounted sessions, but can accept 10 additional participants for the mat sessions only. If you are selected to participate, you must pay the full cost to NDA upfront by April 10. If a check is not received by April 10, your spot will be forfeited and given to someone on the waiting list

**WAIVER OF LIABILITY AND ACKNOWLEDGMENT OF FINANCIAL RESPONSIBILITY**

*(An additional waiver of liability may be required by the facility.)*

I, as rider and/or owner, accept full responsibility for the ability of myself and the horse I will be riding to perform in the clinic with risk of injury or re-injury.

I agree to abide by all NDA rules and fulfill all financial commitments related to this clinic. Regardless of any agreements between the rider and the horse's owner, the rider (as the clinic participant) is ultimately responsible for paying the participant fees to NDA and for paying the stabling and any related fees to the facility hosting the clinic.

Rider's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Application is due on or before April 1.**

All applicants will be notified of the Selection Committee's decision by April 5.

**PLEASE RETURN THIS COMPLETED FORM TO:**

NDA via Sandie McConnell

5201 West Old Cheney Rd

Lincoln, NE 68523

or email to: [mcconnellsandie@gmail.com](mailto:mcconnellsandie@gmail.com)



**\*Please DO NOT send payment with your application.** Payment will be requested upon acceptance to clinic, payable to Nebraska Dressage Association.