



Clinic Participation Form Michael Poulin Clinic July 25-26th

Contact:

Auditor Name _____ Days attending _____

Rider Name _____ Horse Name _____

Address _____

Phone _____ E-mail _____

Lessons:

_____ Private

_____ Semi-Private

Stabling:

mare stallion gelding

Arriving on _____ am pm

Departing on _____ am pm

Fees:

\$15.00 Auditing per day

\$220.00 Private Lesson

\$110.00 Semi-Private Lesson

\$7.50 Amish Boxed Lunch

\$35.00 Stabling per night

Requirements:

- All horses must have a negative Coggins test within 12 months of the arrival/departure dates.
- All horses must have proof of a flu/rhino vaccine within 6 months, but no less than 2 weeks of the arrival/departure dates.
- No dogs are allowed on Fair Weather property.
- All riders must wear an ASTM approved riding helmet while mounted.
- All riders must sign a participation waiver before riding.
- Make checks payable to Katherine Poulin, P.O. Box 23354 Chagrin Falls, OH 44023

Date of Coggins _____ Date of Flu/Rhino _____