



THE COLORADO HORSE PARK

Ride & Learn Series Presents...

Marilyn Payne Eventing Dressage and Show Jumping Clinic

Tuesday June 12 and Wednesday June 13, 2018

Marilyn is a FEI 4* Eventing Judge, and a USEF “S” Dressage Judge who has officiated at major eventing and dressage competitions in the U.S. and around the world. In addition to judging twice at the Olympics, a rare honor, and at the World Equestrian Games, she has presided at the European Eventing Championships and Central American Games and has judged every 4* event in the world. Marilyn is a member of the FEI Eventing Committee, representing the perspective of judges world wide, as well as a member of the USEF high performance and eventing committees.

An active competitor in eventing and dressage and a highly popular trainer and clinician, Marilyn enjoys teaching all level of riders, using a systematic approach to bring out the best in each horse/rider team. Marilyn’s Applewood Farm is a beautiful eventing and dressage facility in Hunterdon County, NJ for learning, showing and playing.

On Tuesday Marilyn will teach dressage and on Wednesday Show Jumping using the techniques learned the day prior to have a balanced partnership between horse and rider over fences.

For more information, please visit their website at www.marilynpayne.com

Level : Beginner Novice _____ Novice _____ Training _____ Preliminary _____ Intermediate _____

Clinic:

Both Days \$385 (including lunch)

Haul In/Stabling (If Applicable):

Number of Horses _____

No. of Nights _____

Stabling (per horse, per night) \$35 _____

Haul-In (per day, if not stabling) \$15 _____

Other Packages (If Applicable):

Auditing (Per Day) \$50 _____

Reception \$25 _____, if riding in the Clinic \$15 _____

- Reception after Day One of the Clinic on: **Tuesday, June 12, 2018**
 - Includes appetizers and two drink tickets (well liquor and select soda’s or water only)
 - *Additional beverages will be available at an additional cost to the attendee*

Ride & Learn Clinic

Payment Form

Name: _____
Horse(s) Name: _____
Address: _____ City/State/Zip: _____
Cell Phone: _____ Alternate Phone: _____
Email: _____
Trainer's Name: _____

Please make checks payable to: The Colorado Horse Park
Visa() MC () AMEX ()

Name on Credit Card: _____
Credit Card Number: _____
Expiration Date (MM/YY): _____ CVV Code: _____
Signature: _____ Date: _____

Included in the clinic fee is a \$50.00 non refundable deposit/office fee. Refunds before closing date, June 5, 2018 will be in full, minus the deposit. There will be no refunds after the closing date.

I understand that the sport of showjumping is a high-risk sport and that my participation in this educational activity may also involve participation in an "equine activity" as defined by applicable laws and is wholly at my own risk. I understand that my participation involves all inherent risks associated with the dangers and conditions which are an integral part of equine activities, including, but not limited to, the property of equines to behave in ways which may result in injury, harm of, or even death to humans and other animals around or near them; the unpredictability of equine reaction to sounds, sudden movement, smells and unfamiliar objects; persons or other animals; hazards related to the surface and surface conditions; collisions with other equines or objects; and the potential of a participant to act in a negligent or unskilled manner which may contribute to injury to the participants or others, including falling or inability to maintain control over the animal. By participating in this activity, I agree to assume responsibility for those risks, and I release and agree to hold harmless, Colorado Equestrian Partners, LLC., its Partners, The Colorado Horse Park, its Board of directors, event organizer, management, staff, trainers, borders, and students or anyone associated with the facility, liable for any injuries to me or my horse.

Warning: Under Colorado Law, an equestrian professional is not liable for an injury to, or death of a participant in equine activities, pursuant to section 13-21-130 Colorado Revised statutes.

Name: _____ Signature: _____

Relationship to Minor: _____ Date (MM/DD/YYYY): _____
(If participant is under 18 years of age, parent or legal guardian must sign this release)

Please Return to:
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