

Horse Trials PEI

Presents

Waylon Roberts

Cross-country & Show Jumping Clinic

August 5th & 6th, 2017



Horse Trials PEI is very happy to announce that Waylon Roberts of Port Perry, Ontario, will be coming to PEI to teach a two day Show Jumping and Cross-country Clinic. This clinic will be held at the Strathgartney Equestrian Park in Bonshaw, PEI.

Waylon Roberts grew up on Dreamcrest Farm, owned and operated by his parents Ian Roberts and Kelly Plitz. Waylon has many accomplishments to his name already, including: 2007 Silver team medal Eventing, Pan American Games in Brazil 2002 Gold Team Medalist, FEI Children's Jumper Championships

Six-time Royal Winter Fair Indoor Eventing Champion
Waylon also represented Canada five times at the North American Junior and Young Riders Championships, not once incurring any cross country penalties; he won a team bronze medal at the NAYRC in 2006. Waylon is an excellent coach for both jumpers and eventers alike.



Photo by Cealy Tetley, www.tetleyphoto.com



This will be a two day clinic, focusing on Show Jumping on Saturday and Cross-Country on Sunday. Riders not interested in cross-country can do show jumping lessons each day if numbers warrant.

Important Information!

Entry Deadline: July 28th, 2017. Spots will not be held without fully paid entries in hand. Your entry must be complete, in hand, and paid in full before deadline in order to have a spot in the clinic. Clinic goes ahead Rain or Shine! No refunds without Vet/Doctor's certificate.

Maritime Horse Trials Members

Two day Fee: \$150

One day Fee: \$75

Non-Members

Two day Fee: \$175

One day Fee: \$100

For more information and entry forms, please visit us on Facebook (Horse Trials PEI)

Website: www.horsetrialspei.ca

Or Contact:

Deborah Smith 902-620-1309 ~ eventingbee@hotmail.com



This Event is made possible by funding provided by the PEI Department of Health & Wellness and Island Horse Council.



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Waylon Roberts Clinic

August 5th & 6th, 2017
Entry Deadline: July 28th, 2017

Rider Name: _____ Senior ☐ Junior ☐ DOB: _____

Address: _____

Email: _____ Phone: _____

Horse Trials Membership #: _____ PSO (IHC/NSEF/NBEA) Membership #: _____

ALL RIDERS!: Include a copy of your Provincial Horse Trials Membership and PSO membership!

Horse/Pony Name: _____ Age: _____ Height: _____

Rider Information	
How many years have you been riding?	
Have you ever competed in a Horse Trial, Pony Club Rally or Hunter/Jumper Show?	
If so, what is the highest level you have competed at?	
What height of jumps are you comfortable jumping?	
Horse/Pony Information	
Has horse/pony competed in a Horse Trial, Pony Club Rally Or Hunter/Jumper Show?	
If so, what is the highest level the horse or pony competed at?	
What height does the horse/pony jump comfortably?	
What level are you competing at this year?	

Liability waiver must be completed and payment must be included with the application.
E-transfer to horsetrialspei@gmail.com Cheques to be made payable to: **Horse Trials PEI**

<p>Mail Entry to:</p> <p>Deborah Smith 2542 Route 13 North Wiltshire, PE C0A1Y0</p>
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Two Day Fee: \$150 ☐ Horse Trials members
\$175 ☐ Non-Members

One Day Fee: \$75 ☐ Horse Trials members
\$100 ☐ Non-Members

Show Jumping only, no XC: ☐

Total fee enclosed: \$ _____

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Waylon Roberts Clinic
August 5th & 6th, 2017

TERMS AND CONDITIONS
THIS SECTION MUST BE COMPLETED

THIS DOCUMENT WILL AFFECT YOUR LEGAL RIGHTS AND LIABILITIES
PLEASE READ CAREFULLY

I acknowledge that the sport of Horse Trials and Three-Day Eventing is a high-risk sport and that I am participating in this clinic at my own risk and in full knowledge of the hazards and potential hazards that are inherent in this sport. I further acknowledge the inherent risk in riding and working around horses, which risks include bodily injury to both horse and rider which can result from normal use, competition or schooling.

In consideration of being allowed to participate in this clinic, I hereby assume all risk and I hereby release and absolve the Organizing Committee, Horse Trials Canada Inc., and its affiliated Horse Trials Associations, Equine Canada and their officials, clinicians, volunteers, Officers, Directors, agents, representatives and employees, independent contractors and the owners and occupiers of the land upon which the clinic is held from all responsibility, liability, or claims of any nature and kind which I may have arising from my participation in this activity, including but not limited to: bodily injury or death to myself or my horse(s) and damage to property arising from any cause whatsoever, including the negligence of one or more of the individuals and organizations referred to herein.

I hereby declare that in making this entry that I have read and fully understand and agree to the terms and conditions stated herein and that it is binding upon my executors, heirs and assigns.

Rider Signature _____ Owner/agent Signature _____

Date _____ Date _____

(If the rider is under eighteen years, the parent/guardian must also sign below)

I acknowledge as parent/guardian of _____ that I have read and fully understand and agree to the terms and conditions stated herein on behalf of _____ and myself.

Parent/guardian Signature _____ Owner/agent Signature _____

Date _____ Date _____

I hereby confirm that there is \$ 2 million liability coverage in force with respect to the competing horses (IHC insurance for PEI riders, membership in NSEF or NBEA for others)

Yes _____ No _____ Signed _____