



Hosted by **JOURNEY'S HAVEN RIDING SCHOOL**



**“Quadrille & Gymkhana Clinics”**

**April 17<sup>th</sup> & 19<sup>th</sup> 1pm – 3pm**

230 Anawan Street, Rte. 118, Rehoboth, MA 02769  
508-252-9925

**\*Rain or Shine ~ Indoor Arena\***

**“Quadrille Clinic”**

Rules, etiquette, basic arena geometry and figures will be covered on the ground. Riders will then have a chance to ride some of the figures on horseback to music. Copies of tests and movements will be provided to all participants.

**“Gymkhana Clinic”**

Rules, safety and scoring will be covered for several games including: ball & cone race, cloverleaf, pole (cone) bending, musical dismount, ride a buck, and more. Some games will be practiced un-mounted and then mounted. Awards will be given for each game!

Please fill out both these forms and either email [journeyshaven@comcast.net](mailto:journeyshaven@comcast.net), drop off or mail back to Journey's Haven by **April 18th**. *Space is limited and cannot be reserved without payment.*

**NAME:** \_\_\_\_\_ **RIDER OR AUDITOR (CIRCLE ONE)**

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_ **ZIP** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_ **PHONE #'S:** \_\_\_\_\_ / \_\_\_\_\_

Level of your riding ability: BEG \_\_\_ INT \_\_\_ ADV \_\_\_ (please check one) PONY CLUB: YES NO  
Name of Club: \_\_\_\_\_

**Brief description of your Riding:**

Please describe below your riding experiences, including flat work & jumping abilities for the clinics.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Small Group Sessions \$60.00**

**AUDITING FREE!**

If you need a horse/pony JHRS offers some great mounts for the day of the clinics, Just Ask ☺

**We will do our best to make sure you have a great learning experience! We will notify you if there are any changes to the clinics.**

***“Feel free to bring your own Tests!”***

**THANK YOU FOR JOINING US!**

***We hope you enjoy your Ride!***

**OFFICE USE ONLY**

AMOUNT PAID \$ \_\_\_\_\_ CK/CASH



Journey's Haven Riding School  
 230 Anawan Street  
 Rehoboth, MA 02769

**RIDER INFORMATION AND WAIVER FORM**

PLEASE PRINT

Name of Rider/Auditor \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name of Parent \_\_\_\_\_ (If student under is 18 yrs of age)

Address \_\_\_\_\_

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

Telephone Home \_\_\_\_\_ Work \_\_\_\_\_

Cell \_\_\_\_\_ EMAIL \_\_\_\_\_

**Emergency Phone** \_\_\_\_\_ **Name** \_\_\_\_\_

Medical Ins. Co. \_\_\_\_\_ ID # \_\_\_\_\_

I, \_\_\_\_\_ fully understand the risks inherent in horseback riding and certify that I, (my child) ride at my own risk. Further, I agree to hold harmless and not bring suite against, Sherri Savoy, Journey's Haven Riding School, Julie Blackburn, nor their Owners, Heirs, Agents, or Land Owners, for any accident, personal injury, damage, or loss that may occur while riding under the supervision or during unsupervised riding in preparation of, or cessation of, supervised instruction, riding clinics or other equestrian events, or during trail or pleasure riding at Journey's Haven Riding School, located at: 230 Anawan Street, Rehoboth, MA, or on surrounding landowners land.

I also agree to wear a riding helmet at all times while mounted on horseback and familiarize myself with the JHRS Barn Rules and Regulations.

I, by signing this form below, do agree to take full personal responsibility for my/my child's decision to ride and be in personal contact with horses.

**WARNING Under Massachusetts Law, an equine professional is not liable for an injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities, pursuant to Chapter 128, Section 2D of the MASS. General Laws.**

SIGNED \_\_\_\_\_ Date \_\_\_\_\_

(Parent's signature if student is under 18 yrs. of age)

Journey's Haven Riding School \_\_\_\_\_