

Registration Form



Hoof Trimming
For Horse Owners 102
a one-day clinic

Saturday April 28, 2012 9am-4pm
Rowantree Farm Franklin, TN

Name: _____ Date: _____

Phone: _____ Cell: _____

Email: _____

Emergency Contact (name & #): _____

Registration (check one) - *Workshop limited to 10 participants with 20 auditors.*

- Earlybird Registration (\$65 payment must be received with forms by 04/27/12)
- Regular Registration (\$85 admission if paid day of workshop)
- Earlybird Auditor (\$35 payment must be received with forms by 04/27/12)
- Regular Auditor (\$45 admission if paid day of workshop)

Payment type (check one) - *Please submit registration and release forms with payment.*

- Check (payable to Leitha Lee) Cash
- Paypal to Leitha@hoofsmart.com (earlybird payments only – completed forms may be scanned and submitted via email)

Participants only (check one) - *Are you bringing a horse for hands-on trim practice?*

- My horse lives at the host facility.
- I would like to borrow an on-site horse.
- I'm bringing a horse for hands-on trimming practice.
 - Copy of current negative Coggins attached

Horse Name: _____ Breed: _____

Gender: _____ Color/Desc: _____

Earlybird registered participants who withdraw before the clinic date will receive a refund, minus \$20 non-refundable deposit. Earlybird auditors who withdraw before the clinic date receive full refund. Refunds less Paypal fee if applicable. Questions? Contact Leitha Lee at Leitha@hoofsmart.com or 256-653-6285.

Information Packet and Registration and Liability Release forms available from www.hoofsmart.com

Registration Checklist:

- Registration Form
- Payment
- Signed Release from Liability forms
(HoofSmart and host facility)
- Copy of current negative Coggins

Please allow 3 days for delivery when mailing payment and forms for Earlybird registration. Mail completed forms and payment to:

Leitha Lee
379 Cabbage Patch Rd
Valhermoso Springs AL 35775



HoofSmart Release from Liability

THIS DOCUMENT WAIVES IMPORTANT LEGAL RIGHTS
READ CAREFULLY BEFORE SIGNING

WARNING

Under Alabama Law, an equine activity sponsor or 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 the Equine Activities Liability Protection Act.

I agree to the following, in consideration for my participation in an event sponsored by Leitha Lee and HoofSmart:

I agree that I choose to participate voluntarily in the event as a rider, driver, handler, lessee, owner, agent, coach, trainer, or as a parent or guardian of a minor child. I am fully aware and acknowledge that horse events involve inherent dangerous risks of loss, and serious bodily injury, including, but not limited to, head injuries, trauma, broken bones, pain and suffering, or death ("Harm").

I agree to release, indemnify and hold harmless Leitha Lee, HoofSmart and the Event Location, their officers, officials, directors, employees, agents, and volunteers from claims for Harm to me or my horse, and for claims made by others for any Harm caused by me or my horse at the Event.

I agree to expressly assume all risks of Harm to me or my horse, including any Harm resulting from the negligence of Leitha Lee, HoofSmart, or the Event Location owners, officers, etc.

I hereby consent to and authorize the use of photographs and any other audiovisual materials taken of me or my horse during this event, for promotional or educational purposes.

If I am a parent or guardian of a minor child, I consent to the minor child's participation in the Event and agree to assume all of the obligations of the release on the child's behalf.

I have read and understand this Liability Release and agree to its terms.

Signature: _____ Date: _____

Printed Name: _____

If under 18 a Parent or Legal Guardian must sign below:

Signature: _____ Date: _____

Printed Name: _____

You may not participate in this event unless you have signed this release.

ROWANTREE FARM

4566 Peytonsville Rd, Franklin, TN 37064

RELEASE AND INDEMNIFICATION

I, _____, of _____,
Realizing that there is inherent danger of accident and injury in riding and working with
and around horses, hereby agree as stated in the next paragraph.

I hereby waive on behalf of myself and all members of my family any claim by or
on behalf of any member of my family for injury or damages arising out of any accident
which might result in injury to me or any member of my family while riding or working
with or around any horses or any other activity on the property of Rowantree Farm; and
further waive any claim by any member of my family for any injury or damages resulting
in any way from any emergency treatment or aid which Mimi Pantelides might give or
cause to give to any member of my family following any such accident and I agree to
hold Mimi Pantelides harmless from any and all such claims by me or any member of my
family. The members of my family include my parents, my children, my spouse and
myself and my extended family.

WARNING: Under Tennessee law, an equine professional is not liable for an injury to or
death of a participant in equine activities resulting from the inherent risks of equine
activities pursuant to Tennessee Code Annotated, Title 44, Chapter 20, Section 1.

Dated this _____ day of _____, _____

Mimi Pantelides

signature

(please print)
Name: _____

Phone: _____

Address: _____
