



OPEN CENTERED RIDING CLINIC

Susan Kelley, Centered Riding® Instructor Level III

Clinic Date: _____

Topic: Exercises & instruction to improve the riders body awareness, overall strength, harmony, & balance. Riders will gain a deeper understanding of how to use their body correctly to find harmony with their horse.

Cost to Ride: \$300/weekend

Cost to Audit: \$25/day, \$40 weekend

Please note: registration is required no later than 2 weeks ahead of clinic date

Note: If you need a horse for the clinic, we have kind and experienced lesson horses available at an additional charge of **\$40/day**. Please check with Susan about the availability of the correct mount to suit your needs.

LIMITED Overnight Housing* on premises, for up to 4 participants: \$40 each

Limited stalls available (\$30) and separate 2 stall guest barn with turnout available for 2 horses: \$50 per horse

*** Please contact Susan Kelley directly to discuss overnight housing. (585) 507-3397 **Participants who choose Housing/Stall have priority over those solely boarding.*

Helmets and appropriate footwear are required for all riders. Riders must sign a waiver of liability and provide a copy of their horse's current Coggins test at the beginning of the workshop. A parent or guardian must sign if participant is under 18 years of age.

Please send check made payable to Susan Kelley with completed registration form in order to hold your space in the clinic. We have limited beds and stalls:

Susan Kelley – Post Office Box 279 - Geneseo, NY 14454

PLEASE NOTE: Payments are refundable, should a valid health concern arise.

Name: _____ Age: _____

Address: _____

Phone Number: _____

E-mail: _____

Your e-mail address will not be shared. Your scheduled riding time will be e-mailed to you before the clinic.

Registration Type:

Rider (\$300) _____

Auditor (\$25/day, \$40 weekend) _____

Optional Housing \$40/Stall Rental \$30: Yes _____ No _____

Optional Horse rental @ \$40/day: Contact Susan for rental availability.

Describe yourself as a rider (Rider experience, how long, type of rider, past injuries):

Horse's Name: _____

Horse's Age: _____

Describe your horse (experience, type of riding, temperament, gender, breed):

What are your goals for this clinic?