

NATURAL HORSEMANSHIP (Equine Ethology) CLINIC RESERVATION



Clinic DATE(s) _____

Equine Ethology (natural horsemanship):

- Savoir 1 Initiation (3 hrs)
Savoir 2 Trust and respect (6 hrs) (*pre-requisite Savoir 1*)
Savoir 3 Partership (12 hrs) (*pre-requisite Savoir 2*)
Savoir 4 Harmony and liberty (12 hrs) (*pre-requisite Savoir 3*)
Challenge Supervised natural horsemanship friendly tournament (3 hre et +) (*pre-requisite Savoir 1*)

Western competation training:

- Shomanship Horsemanship Trail class
Others Specify Duration : _____ hrs distribute on _____ day(s) Description : _____

BARN (facility): _____ Indoor arena YES NO

How to get there : _____

COORDINATOR (Host): _____

ADDRESS : _____

TELEPHONE : _____ E-MAIL : _____

INSTRUCTOR: **Hélène Perreault** (*QEF/EC trainer, FFE BFEE2, Centered riding instr.*)

ADDRESS: **165 rue de Salaberry, Joliette, Qc, J6E 4E8**

TELEPHONE: **(450) 755-3694** E-MAIL: helene@x-equo.com WEB SITE : <http://www.x-equo.com>

Parties (coordinator and instructor) declares and agrees on the following:

The coordinator invite the **instructor** for a clinic, at the dates and facility mentionned above. The maximum number of participants is six (6) per clinic, minimum of four (4). The fees are:

- Participants : \$20/hr per participant (*)
 Auditor: \$5/hr per auditor (*max \$15/day*) ;
 Challenge : 50% rebate for all participants and auditors on the regular price
(* **Participants rebate of 50% on the hourly rate from the 7th hr** (*in the same group of 4 and more*).

Travelling fees will be :

- \$0,25/km for the distance calculated on the round trip

A non refundable deposit of \$200 has to be send to the instructor for reservation with this agreement (at least one month before the clinic). When a clinic is planned in a facility without any inside arena, in case of bad weather, the coordinator may cancel 24 hrs before the first day of the clinic and the deposit will be transfer and apply to a later clinic (dates to be schedule between parties no later than 12 months after the original clinic). In the case of a cancellation by the instructor, all amount paid will be refund. Balance is payable at the end of the clinic.

The coordinator will be responsable for the facility reservation at his own expense. **The instructor** will bring with him sound system as well as equipment to be attribute to each participant (halter/lead rope/stick) for the clinic duration. **The coordinator** will promote the event but all ads must be previously approved by the instructor. Upon deposit received, the clinic will be promoted on X-EQUO website. **The coordinator** will manage the entries et will make sure that the **ASSUMPTION AND ACKNOWLEDGEMENT OF RISK forms** (minor or adult) for all participants will be complete before the clinic and will be given to the instructor. No stallion is admitted to the clinic. Photos is permitted but no videos. A complete auditors list with their e-mail and/or mailing address will be given to the instructor at the end of the clinic. **The coordinator** will be responsable for the lodging and meals of the **instructor** and his horse (if applicable) for the duration of the clinic.

Signature _____ Date _____ Signature _____ Date _____
Coordinator Instructor