

Teresa Kackert and Great Horses of America

'Soft Touch' Horse Training®

AQHA Professional Horseman & Triple CERTIFIED Pro Trainer & Instructor

'Your horse will know the difference'

20 yrs experience – Professional Riding, Training, Boarding, Sales & Consulting

www.GreatHorses.org

email: greathorses@msn.com

Ph. 619-572-3087

Fax (888) 382-2808 (rev 6-2010)

Clinic Registration

Desired Clinic Date: _____

Please Print Legibly: Today's Date: _____

How did you hear about us / decide on this clinic? _____

First Name _____ MI _____ Last Name _____

Address: _____

Cell Phone: _____ Home Ph. _____

Birthdate (opt) _____ (month & day for birthday 'Specials')

E-Mail address: _____

Horse & Rider Safety data: (riders or horses using mind or mood altering medications are not permitted)

Rider 'Approx' Age _____ Sex _____ Ht _____ Approx' Wt _____

Any medical issues we need to know: _____

Emergency Contact Name: _____

Emergency Contact Phone#: _____

Level of Riding Experience (check one)

_____Amateur 1-10 rides _____Experienced 51-100

_____Novice 11-20 _____Very Experienced 101-200

_____Moderate 21-50 _____Advanced 200+

_____Professional

Where do you feel your riding level and ability is now (circle one)?

_____Below Avg. _____Above Avg.

_____Average _____Excellent

Where would you like it to be? _____

What kind of horse related or riding activity do you enjoy most? Explain.

_____English _____Western

_____Arena _____Trail

_____Jumping _____Other

What is your primary equestrian goal right now?

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Do you have a long-term equestrian goal? Explain.

Where do you feel your "Horsemanship knowledge" is right now?

Below Avg. Average Above Avg. Excellent

Where would you like it to be? Average Above Avg. Excellent

Simply, what would make our Clinic a SUCCESS for you? _____

Would you or your horse like to take lessons from Teresa either at our stable or yours in the future? _____
If 'yes', approx when? _____

1. Remember, we're also mobile trainers and can come to your stable either for private sessions (\$60 ppph) or for your small group 2-3 (\$30ppph) or 3hr mini-clinic (\$75pp, min 3-4) plus travel cost.

2. We also offer boarding (from \$200 +) and CERTIFIED Professional training (from \$250+) here per month. We have over 900 acres of private trail riding onsite!

3. See our website for 'Great Horses' and ponies available for sale and a full pricelist for boarding, training and sales: www.GreatHorses.org and www.MenifeeMeadows.com !



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HORSE INFO:

Your horse's name: _____ Sex _____ Age _____ Ht _____

Breed: _____

Any horse safety or behavioral issues we need to know about? _____

Has your horse ever: kicked (must wear red ribbon in tail), reared, flipped over or bit a person? If yes, explain. _____

Number of years/months owned by you: _____ Last time you rode this horse? _____

Has your horse been in training with another trainer? _____ When? _____ Who? _____

Previous use of horse: _____

Current use of horse: _____

Future / desired use of your horse: _____

Does your horse tie well? _____ Lead well? _____ Tack well? _____ Load well? _____

Does your horse do WELL around other horses: standing, tied, leading, riding? explain

What behavioral issue does your horse need help with if any? _____

Has your horse had any 'traumatic' experiences that you know of? _____

Is your horse a little bit spooky or jumpy on the ground, at the stable, new places?

Why are you or your horse attending this clinic? _____

Does your horse have any soundness or health issues? _____

What are your horses best attributes, strongest skills, etc? _____

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Partial Terms:

1. 50% deposit is required in advance to schedule and reserve your clinic space, preferably a minimum of 2 weeks in advance of desired / scheduled date.
2. Balance is due upon arrival and prior to the clinic. All other fees and or expenses incurred by Client and or Client's horse are due in full prior to client departure.
3. Client Cancellation fee prior to 7 days before clinic is 50% of deposit amount due and or paid. If Client cancels less than 7 days prior to clinic, no refund or credit is due Client. Cancellation notice must be made in writing, email is fine.
4. Clinics may be rescheduled only by Trainer due to low enrollment, weather or other limiting factors. If altered by us, full refund or return of pre-paid funds will be made at your written direction within two weeks via our corp check.
5. Liability Release form signed by all attendees is required. Minors are permitted only with our prior approval and require Parental signature and presence on site, helmet, etc. Adult Photo ID reqd at all times.
6. Trainer reserves the right to stop, cancel and or excuse any horse, rider and or attendee at any time due to any operational, safety, behavior and or health concern with NO refund due client.
7. Auditors WILL be charged a \$10 (Half Day 'ACTIVE') to \$20 (Full Day 'ACTIVE') auditor fee to observe the clinic. \$0 for '**SILENT**' auditors (ie, observe only, no questions or participation).
8. Horses and clients are permitted ONLY in the designated areas during the designated clinic times and are RESTRICTED from all other stable areas including trails at all other times.
9. Additional 'haul in' horses are NOT allowed without our express written permission and payment of the appropriate fee in advance (ex. Audit fee, haul in fee, etc). No other animal of any kind is permitted onsite.
10. Client agrees to pay all fees as agreed and not to stop, refuse, hinder and or dispute payment at any time. Our Administrative fee to resolve any payment dispute or action by the Client is \$60 per hour in addition to the service or product fee in dispute, minimum \$60.
11. Trainer services outside and in addition to the actual 'Clinic' are provided and due when provided at the rate of \$60 per hour, minimum \$30 (ex. Horse loading, unloading, etc....)
12. All fees, terms, etc are on an each, per person and or per horse basis as applicable.
13. All participants are required to be on time, clinic will start and finish as scheduled with no adjustment for early or late attendees either for arrival, departure and or incomplete participation.
14. Participants are responsible for any and all damage caused by themselves and or their horses while on stable premises.

Please take a moment between now and the Clinic to fill out these pages and **fax (888-382-2808)** or email (GreatHores@msn.com) them back to me as soon as possible, including the following:

- A. digital photo of your horse (and you if possible) if available (email only: GreatHorses@msn.com)
- B. Fax (888-382-2808) or email (GreatHorses@msn.com) **VERIFICATION of your horse's CURRENT "4-way" vaccine AND West Nile administered by you or your Vet to your horse recently.** If you vaccinate yourself, then a WRITTEN STATEMENT BY YOU IS REQUIRED (email is fine). This may seem like an inconvenience. However, even though you may think your horse is fine, it will be the 'other person' who thinks the same thing that will infect your horse – and ours. The professional, courteous and conscientious thing to do is for everyone to be protected (and to verify it ☺). Thank you very much!

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**ALL STRANGLES HISTORY MUST BE DISCLOSED IN ADVANCE – please email asap.
STANGLES VACCINES ARE NOT PERMITTED WITHIN 72 HOURS OF ARRIVAL. STRANGLES
EXPOSED HORSES ARE NOT PERMITTED WITHIN 30 DAYS OF ARRIVAL. Thanks!**

Understood and Agreed to, all 5 pages, terms and conditions:

Cash, Check, Paypal or Credit Card deposit is due with form.

Please date and sign:

Date: _____

Print Name: _____

Signature: _____

Clinic Type (circle one): HalfDay \$75
FullDay \$150 Reservation requires 50% deposit

Price: _____

Deposit 50%:\$ _____ How Pd: _____

Auditors: _____ Other: _____

Balance Due: _____

Final Pmt: _____

MGT SIGNS:

“ITEMS TO BRING WITH YOU”

Here's the last of the information for a successful clinic.

Please give me a call if you have any questions! Thanks!

1. Plenty of whatever you like to hydrate yourself with (non-alcoholic) and something safe & portable to transport it with you as we move about the stable areas, snacks too if need be.
2. Helmet (required for all minors)
3. Lunge whip (I have new ones avail for purchase if you need one)
4. Dressage whip (I have new ones avail for purchase if you need one)
5. Lounge line (I have some new ones avail also)
6. Halter - any will do unless we're schooling on a bad "tie-er", then you will need a 'rope' halter only with a long lead (12 feet or so) same for any trailer schooling if needed.
7. Bridle with whatever bit you have on it PLUS a loose ring snaffle bit for back up if you have one.
8. Saddle you like (or would like) to ride in, pad, girth, breast collar, boots, etc.
9. Any extra items you might prefer should be fine: boots, chaps, half chaps, small spurs if you regularly use them, crop, etc.
10. gloves to protect your hands
11. shade hat
12. sunscreen, sunglasses
13. change of boots/shoes & socks if your horse needs or receives in-hand water crossing training
14. plenty of patience, a great attitude and a willing, inquisitive spirit!

We look forward to meeting you both!

Let's have some fun!

INITIALS: _____