

HIGH POINT

Dressage Spa Weekend

April 20 - 22, 2012

Rider/Auditor Registration Form

RIDER _____ HORSE _____

ADDRESS _____

TELEPHONE _____ EMAIL _____

PACKAGE I

\$750 [2 lessons, 1 seat lesson, 2 equine Reiki sessions, 1 human massage, 2 yoga sessions] _____

PACKAGE II

\$695 [2 lessons, 1 seat lesson, 1 equine massage, 1 human massage, 2 yoga sessions] _____

PACKAGE III

\$650 [1 lesson, 2 seat lessons, 1 equine massage, 1 human massage, 2 yoga sessions] _____

OR

INDIVIDUAL PRICING & ADDITIONAL SERVICES

*Lesson with Felicitas \$250 each or 3 for \$600 _____ Friday _____ Saturday _____ Sunday _____

*Seat lesson with Isabelle \$175 each or 3 for \$450 _____ Friday _____ Saturday _____ Sunday _____

Schooling horse for seat lesson \$25 each lesson _____ Friday _____ Saturday _____ Sunday _____

*Equine massage \$85 _____ Friday _____ Saturday _____ Sunday _____

*Human massage \$75 _____ Friday _____ Saturday _____ Sunday _____

Yoga session \$15 each _____ Friday _____ Saturday _____

**If you have purchased a package, please check the day[s] preferred for your ride and massages.*

AUDITOR \$30 for all or part of weekend _____

STABLING \$35 each day _____ Friday _____ Saturday _____

TOTAL [Check payable to HPF, Inc. holds a spot in the clinic, and will be deposited the week before the clinic. Please mail to the address below.] TOTAL _____

LIABILITY WAIVER

I, the undersigned, hereby agree that High Point Farm, hereinafter referred to as HPF, Inc., contracted workers, employees, equine owners, CZ Farms, Inc., THF-EQ LLC; High Point Land Holding LLC, Stephanie P. Cumming, LLC.; Isabelle von Neumann-Cosel; Felicitas von Neumann-Cosel, and/or spectators shall not be responsible for any damages, accident, injury, death and/or theft to any spectator, student, and/or student's mount with regard to any riding lessons conducted on the premises where HPF, Inc conducts business. The undersigned realizes that working with and around horses involves considerable risk. Therefore, the undersigned agrees to waive, release, indemnify and hold harmless HPF, Inc., its owners, contracted workers, contracted instructors, leased horses and their owners, and any associated land owners from any claims or demands for damages, injury, death, or theft to any person or property resulting from said student's activities on the premises where HPF, Inc conducts business. I, the undersigned, also understand that as a student and/or spectator, I am not covered under any HPF, Inc. insurance policy. Nor am I interested in making any claims against HPF, Inc. Instead, I agree to be covered for any damages, accident, injury, death, and/or theft by my own insurance policy or risk no coverage at all.

Signature _____ Date _____