



The Good Horseman® Foundation
presents
USDF Instructor Certification Workshop



Subject: LUNGEING

With Gerhard Politz
USDF Instructor Certification Examiner

USDF University #101226 Total Credits: 2

April 26-27, 2008

Post Oak Farm, Gainesville, GA

4568 North Browning Bridge Road,

Gainesville, GA 30506

Farm: 678-316-8972

Organizer's cell number: 404-441-7133

WHAT TO BRING: Riders are **required by USDF** to wear a ASTM-approved safety helmet and they must agree to this before the application is accepted. Riders should wear conservative riding attire, boots and breeches. Everyone should bring comfortable clothes and pillows for when seated in possibly cool temperatures.

USDF UNIVERSITY CREDIT: For credit, participants and auditors must attend the full sessions each day and fill out the enclosed USDF University form and pay the \$5 fee.

DINNER: There will be a Dutch-Treat dinner and talk and discussion session with Mr. Politz at 7:00 p.m. Saturday at the Best Western Hotel in Gainesville (about 10 minutes from the farm).

STABLING: There will be stabling for all Participating Instructors' horses at a fee of \$60 per horse for Friday through Sunday stabling, first bedding included. Additional bedding may be purchased from the farm management. Make the stabling check payable to **Post Oak Farm**.

DIRECTIONS to 4568 North Browning Bridge Road, Gainesville, GA 30506: From **I-85**, turn left onto I-985 to Exit 24 (To Limestone Parkway-Cleveland Hwy.). Turn left. At 2nd light, turn right onto Limestone Parkway (Hwy.11/129). Go two lights and turn right at BP Station onto Clarks Bridge Road. Go six miles and turn right on North Browning Bridge Road. Gate key: **enter "# 8972."** Organizer's cell number 404-441-7133.

DIRECTIONS FROM FARM TO HOTELS: Turn left out of farm drive onto North Browning Bridge Road; left on Clarks Bridge Road; left onto Limestone Parkway (Hwy. 11/129); right at light onto Hwy. 369 (which becomes Jesse Jewell Parkway). Best Western/Lanier Center Hotel is on the left at EE Butler Parkway. Hampton Inn is further down on right. To get to Days Inn, turn left onto Hwy. 60/Candler Road; hotel is on the right.

HOTELS: ACCOMMODATIONS: Days Inn (Formerly Shoney's Inn—host hotel) 770-535-8100 (ask for GHF show discount); Best Western, 770-531-0907; Hampton Inn, 770-503-0300; Super 8 Motel, 770-533-9009



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at Post Oak Farm, Gainesville, GA

PARTICIPATING INSTRUCTOR and AUDITOR APPLICATION

Name _____

Address _____ City _____ State _____ ZIP _____ Phone _____

e-mail address (please print clearly): _____

Lungeing Horse's Name _____

- Please check here if you agree to wear the USDF-required safety helmet (acceptance depends on this)
- Please check here if you plan to attend the Dutch Treat lecture/dinner Saturday night at a local restaurant.

Please turn off your cell phone during all work sessions. If you expect an important phone call, please have emergency calls directed to the organizer's cell phone 404-441-7133, and let us know if you are expecting a call.

FEES:

\$295 weekend per Participating Instructor (includes lunch each day)	\$ _____
\$ 30 per day per Participating Auditor (includes lunch each day)	\$ _____
\$ 10 per day per Demonstration Rider lunch fee	\$ _____
\$ 10 EFT fee for electronic (credit card) payment	\$ _____

Total \$ _____

Stabling: \$60 Friday through Sunday (two nights), first bedding included. See management for additional shavings. Make stabling check to **Post Oak Farm**.

RELEASE

I understand that horses can be unpredictable and sometimes dangerous animals, and that I ride at my own risk. I understand the requirements and limitations of these activities and understand that neither Ann Genovese, Gerhard Politz, The Good Horseman Foundation, owners of Post Oak Farm, USDF nor the organizers accept any responsibility for accidents, theft, damage, negligence, illness or injury to horses, owners, employees, attendants nor any other persons in connection with activities on this property. I accept full responsibility for myself, my horses, my family members and attendants.

“WARNING: UNDER GEORGIA 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 CHAPTER 12 OF TITLE 4 OF THE OFFICIAL CODE OF GEORGIA ANNOTATED.”

Signed _____ Date _____

Adult/Guardian for Juniors _____

Make checks payable to The Good Horseman Foundation and mail to Box 297, Pine Lake, GA 30072-0297.

Visa/MC No. _____	Exp. date _____
Name on card _____	\$10 EFT Fee _____
Zip Code where credit card statement received _____	Total Amount _____

USDF Instructor Certification Workshop/Pre-Certification

Participating Instructor Application

must be a current member of a GMO/IMO or USDF Participating Member

revised 2006

Name: _____

Address: _____ City/State/Zip: _____

Phone: home: (____) _____ barn/work: (____) _____ Fax: (____) _____

email: _____ USDF Membership Number: _____

1. Are you presently teaching dressage? ___yes ___no. If yes, how many students do you have now? _____
How many hours do you teach per week? _____ How long have you taught dressage? _____ Average level of your
students: _____

Age range of students: _____ Do you also teach jumping/eventing? _____

Do you teach Pony Club/4-H/other disciplines? _____ If so, explain: _____

2. How many years have you ridden horses? _____

3. How many years have you ridden dressage? _____

4. What is the highest level you have schooled? _____

5. What is the highest level you have competed? _____

What shows have you competed at and what scores have received? _____

6. Please describe briefly horses you have trained yourself. _____

7. Have you attended a USDF Instructor Workshop before? _____ If yes,

a. Did you attend as a Participant Instructor, Participating Auditor or Silent Auditor? _____

b. Which workshops have you attended (riding/lungeing/teaching) _____

8. Do you plan to test for USDF Instructor Certification? _____

If yes, how soon do you plan to test? _____ What level: __T-2 __T-4

19. What skills do you wish to improve? _____

10. Do you plan to attend all workshops offered locally? ___Yes ___No
If no, which ones do you wish to attend? _____

11. What other USDF educational programs have you attended? _____

12. Do you have your dressage judge license/or L-graduate certificate? _____

Please provide copies of USDF Workshop Evaluations that you have received.

USDF Instructor Workshop

Demonstration Rider Application Form

Revised 03/2006

1. **Name:** _____

Address: _____

Phone: _____ **Fax:** _____ **E-mail:** _____

How many years have you been riding dressage? _____ What is the highest level you have schooled? _____

With whom are you currently taking lessons? _____ Do you ride in a dressage saddle? _____

2. Horse's name: _____

Are you the owner? _____ If not, please list owner's name and address:

Horse's owner: _____

Address: _____

Horse's age _____ height: _____ breed: _____ sex: _____

Horse is schooled through _____ level. Horse has competed through _____ level.

Does this horse show any adverse reaction to the use of dressage whip, lunge whip, and spurs? No ___ Yes ___ (If yes, please explain): _____

In the past six months has this horse had any illness or injuries? No ___ Yes ___ (If yes, please explain): _____

In the past three months, has this horse had any soundness problems? No ___ Yes ___ (If yes, please explain): _____

In the past three months, has this horse bucked, reared or bolted while under saddle? No ___ Yes ___ (If yes, please explain): _____

In the past six months, has this horse shown any aggressive behavior toward people (biting, kicking etc.) or horses (difficult to ride in a group) ? No ___ Yes ___ (If yes, please explain): _____

3. Activities

Please put a checkmark by all of the activities you would volunteer to do. Indicate by placing an asterisk next to the appropriate area, the activity you would most prefer to participate in.

___ Horse/rider combination to take private lesson

___ Horse/rider combination to take group lesson

___ Horse to be lunged without a rider

___ Horse/rider combination to take lunge lesson

___ Rider to take lunge lesson on other horses

___ Horse to be ridden by a Participating Instructor in the program.

4. Fitness Level

Each demonstration session is about 10 minutes of warm-up outside main arena, 30 minutes of work, and another 15 minutes of discussion while you are walking the horse. Knowing you and your horse's fitness level, and knowing the typical temperature expected on the date of this program, please indicate the maximum sessions you want to be scheduled:

___ 1 session per day ___ 2 sessions per day ___ 3 sessions per day

5. Scheduling requests

What days are you available to participate: _____

What hours are you available to participate? (8 am-6 PM) _____

United States Dressage Federation
WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK,
AND IDEMNIFICATION AGREEMENT

PLEASE READ CAREFULLY BEFORE SIGNING

I seek to attend or participate as spectator, competitor, official or volunteer in a clinic, demonstration, educational program, competition or event that may be produced, organized and/or sponsored in whole or in part by USDF. (These activities will be called the "Event"). As consideration for my participation or attendance at the Event, I agree as follows:

I understand that inherent risks and dangers (or intrinsic risks and dangers) are associated with equine activities, whether preparing for, entering, attending, participating in, or leaving the Event. These risks can include, *for example*: the propensity of an equine to behave in a way that may result in injury or death to a person on or near it; the unpredictability of an equine's reaction to sounds, movements or unfamiliar objects, persons, or animals; a collision with an object or other equines or animals; the potential for a person participating in an equine activity to act in a negligent manner, to fail to control the equine, or to not act within his or her ability; and/or natural hazards, including surface and subsurface conditions. **I understand these and other risks and dangers, and I agree to assume them. To the fullest extent allowed by law, I agree to waive any and all rights to sue and hereby release the USDF, event sponsors, contractors, officials, volunteers, personnel, and affiliated organizations from all liability, loss, claims, or actions for injury, death, expense, or damage to me, my horse or my personal property resulting from any action, inaction, or ordinary negligence by the USDF, event organizers, affiliated organizations, volunteers, or personnel (regardless of whether or not these persons/entities were negligent). This waiver and release applies to all risks and dangers, whether they are foreseen or unforeseen, inherent or otherwise.**

I also agree to indemnify and hold harmless the USDF, event sponsors, contractors, officials, volunteers, personnel, and affiliated organizations as to claims for injury, death, loss, or damage to me, my personal property, or my horse or as to claims that others may make for injury, death, loss, or damage that may be caused by me or my horse.

I agree to abide by and be governed by all applicable USDF rules and regulations and am aware of the rules regarding the use of protective equipment. Also, I grant full permission for the USDF and the event sponsor(s) to use and publish any photographs or videotapes taken of me, my minor child(ren), and/or my horse at the Event.

If I am signing as Parent or Legally Appointed Guardian of a minor (under age 18), I consent to my minor child's entry at the Event and agree to accept responsibility for his/her attendance and/or participation.

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I HAVE READ THIS DOCUMENT AND AGREE TO BE BOUND BY ITS TERMS

Signature

Date

Print Name

Date of Birth [If Participant is Under 18]

IF PARTICIPANT IS UNDER 18 YEARS OF AGE:

Signature of Parent or Legally Appointed Guardian

Date

Print Name of Parent or Legally Appointed Guardian

Date

Full Address of Participant and Parent or Guardian Appointed by Law

USDF University
Credit Request for Off Campus Program
USDF Instructor Certification Workshop/LUNGEING

USDF University #101226 Total Credits: 2

Post Oak Farm, Gainesville, GA

April 26-27, 2008

Name (please print): _____

USDF #: _____

If your USDF # is not known, please indicate your city and state:

University credit is requested for the following sessions I am attending:

- Participating Instructor/ Two Days
- Saturday Evening Dinner/Discussion/Lecture
- Participating Auditor/Two Days
- Participating Auditor/One Day
- Demonstration Rider/One Day
- Demonstration Rider/Two Days

To be eligible for credit, auditors and riders must attend for entire program each day.

PAYMENT (check which is submitted)

- Check, payable to USDF, in the amount of \$5.00 (cash is not accepted)

Organizer Signature _____

Date _____



United States Dressage Federation, Inc.

USDF



UNIVERSITY

About The USDF University

The USDF University program is a benefit for all USDF members, adult amateurs, junior/young riders, and professionals, whether they are actively competing or just interested in learning more about their sport. Through the University program, USDF recognizes members who strive to continue their education in dressage and related equine subjects.

USDF University accreditation is automatically given to programs organized by USDF. Organizers of other programs wishing to receive University accreditation may fill out an application and submit it to USDF. Seminars, lectures, workshops, symposia, and other types of educational sessions that include sizable auditor content can qualify for USDF University accreditation. Each program's credit worth is determined by the USDF University Liaison, depending on its length and content.

In order to receive University credit for attending a program, attendees must be current USDF participating, group, intercollegiate/interscholastic members at the time of the program, fill out a simple form provided by the program organizer, and pay the \$5 credit fee (if applicable). University credit is cumulative and can be earned over an unlimited number of years. USDF tracks the credits earned by each member, and USDF University certificates and diplomas are awarded to members who have accumulated the appropriate number of credits. Because recognition is awarded annually, all University credit requests must be submitted to USDF by Sept. 30 to be awarded in that year. Members may view their University transcripts at:

www.usdf.org/calendarevents/university/universitysearch.asp

Educational recognition is as follows:

15 Credits =	USDF Certificate
30 Credits =	USDF Diploma
60 Credits =	USDF Bronze Diploma
120 Credits =	USDF Silver Diploma
180 Credits =	USDF Gold Diploma

For more information or to apply for accreditation of your next educational event, contact:

USDF University Programs Coordinator
4051 Iron Works Parkway
Lexington, KY 40511
859-971-2277 telephone
859-971-7722 fax
university@usdf.org e-mail
www.usdf.org web site

THE TRAINING SCALE
(From the USDF Teaching Manual)

