



The Good Horseman® Foundation
presents
USDF Instructor Certification Testing



Examiners: Lilo Fore and Cindy Sydnor

July 18-19, 2009

Post Oak Farm, Gainesville, GA

4568 North Browning Bridge Road,

Gainesville, GA 30506

Farm: 678-316-8972

Organizer's cell number: 404-289-9328;

e-mail address: goodhorseman@att.net

THE PROGRAM: Candidates will be selected by USDF to participate in this final testing. Some candidates will be tested through 3rd and 4th Level, others tested Training through 2nd Level. The lower level candidates will be tested on the following: lungeing an unfamiliar horse; lungeing a rider on a horse (may be familiar); riding a horse at Training/1st Level; riding a horse at 2nd Level; teaching a private lesson (Training/1st Level); teaching private lesson (2nd Level) and teaching a group lesson of three riders. The advanced candidates must teach a 3rd/4th level student on a horse in a snaffle, another student on a horse in a double bridle; they must ride a familiar horse and an unfamiliar horse, one in a snaffle bridle and the other in a double bridle.

DEMONSTRATION RIDERS: Please fill out this entire application. There are two pages to sign and mail with payment for lunches if desired. Otherwise, there is no charge to be a demonstration rider. Please call the organizer at the phone number above if you need a stall. Stabling is very limited but something may be worked out.

WHAT TO BRING: Riders and candidates when lungeing are **required by USDF** to wear a ASTM-approved safety helmet and must agree to this before the application is accepted. Candidates must bring lungeing equipment including cavessons, side reins, lunge lines and whatever else they may need in teaching a lesson. Riders and candidates should wear conservative riding attire, boots and breeches. Everyone should bring comfortable clothes and pillows for when seated in possibly cool temperatures.

DINNER: There will be a Dutch-Treat dinner and talk and discussion session for the candidates and demonstration riders at a restaurant in Gainesville, location TBA.

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 Equestrian Center**. Demo riders may tack up at their trailer at no charge. Limited stabling may be available. Please check with the organizer (Ann Genovese) before submitting your application.

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 **404-289-9328**.

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). Holiday Inn/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 near the corner.

HOTELS: ACCOMMODATIONS: Days Inn (Formerly Shoney's Inn) 770-535-8100; Holiday Inn/Lanier Center Hotel, 770-531-0907; Hampton Inn, 770-503-0300; Super 8 Motel, 770-533-9009.



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DEMONSTRATION RIDER and AUDITOR APPLICATION

Demonstration Rider's Name _____

Horse's Name _____ Age _____ Breed _____ Level _____

Or Participating Auditor's Name _____

Address _____ City _____ State _____ ZIP _____ Phone _____

e-mail address (please print clearly): _____

Horse's Name _____

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

Thank you for turning off your cell phone.

FEES:

\$ 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 \$ _____

Mail application and payment to **GHF, PO Box 297, Pine Lake, GA 30072**

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

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, The Good Horseman Foundation, owners of Post Oak Farm, the instructors, 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 Testing 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