



# Demo Rider Application

STATE OF MAINE DRESSAGE ASSOCIATION

Western Dressage Symposium with Ida Anderson Norris  
Sunday April 19, 2020

River Winds Farm  
121 Loudon Road  
Saco, ME

## Rider Selection Criteria:

The objective of the Symposium is to provide education on Western Dressage, including the rules, expectations for gaits and movements. Demo riders will be constructively critiqued as part of the educational discussion. Instruction for improvement also will be provided (as in a normal lesson). Our goal is to show different types of horses and different levels of experience with Western Dressage. We welcome beginners as well as accomplished WD riders, but to ensure we get a good mix of demo riders, applicants will be screened and selected. Please complete the short questionnaire below, and feel free to contact us with questions.

<b>Rider Name:</b>		<b>Phone:</b>	
<b>Address:</b>		<b>Email:</b>	
<b>City, State and Zip:</b>		<b>SMDA Member:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No

## Horse Owner Information:

<b>Name:</b>		<b>Phone:</b>	
<b>Address:</b>		<b>Email:</b>	

<b>Horse Name:</b>		<b>Color:</b>	
<b>Age:</b>		<b>Height:</b>	
<b>Breed:</b>		<b>Gender:</b>	

## **SMDA Western Dressage Symposium Rider Information:**

**Are you a current (check all that apply):**

- Western Dressage rider?**
- Classical (English) Dressage rider?**
- Western Pleasure or other Western discipline?**

**Please summarize your riding experience, including levels ridden (if applicable):**

**Please provide some information about your horse, including experience:**

**Will your horse be comfortable riding in an indoor arena with an audience?**

**Please describe your current riding goals, and what you'd like to get out of this experience?**

**Note: Depending on response, we may ask for a short video to assist in the selection process. Your check will not be deposited until the rider selection is complete and your application accepted.**

# SMDA Western Dressage Symposium Fees:

Demo Rider Lesson	\$25
Day Stall (optional)	\$20
Western Dressage Handbook (optional)	\$15
Total Amount Enclosed:	

Proof of negative Coggins (within 3 years) and current vaccinations enclosed with application:

- Yes
- No (must be provided before the clinic)

Please enclose payment in full – make check out to “SMDA”

Send completed entry, Coggins and current shot info, payment, and signed release of liability to:

**Brandi Raymond  
117 Ossipee Trail West  
Standish, ME 04084**

**This is a release of liability – please read carefully before signing**

**Warning – Under Maine law, and equine professional has limited liability for an injury or death resulting from the inherent risks of equine activities.**

The undersigned owner, rider and signing parent or guardian hereby agrees:

I am fully aware that horse sports and competition involve inherent dangerous risk and I expressly assume any and all risks of injury or loss suffered during or in connection with the competition and I agree to release the dressage club, or other organization sponsoring this competition, their officers, directors, employees, members or agents, and the owners and managers of the grounds where this event is held, from any loss, damage, liability or injury arising out of or resulting from this competition or riders participation or entry therein, whether or not such injury or loss resulted directly or indirectly from the negligent acts or omissions of the management of the competition, their officers, directors, employees, members or agents, and the owners and managers of the grounds where this event is held. In the event of injury to the rider or rider’s animal permission is hereby granted for emergency medical treatment for rider or rider’s animal.

I further agree to indemnify, hold harmless and defend the dressage club or other organization sponsoring this competition, the management of the competition, and their officers, directors, employees, members or agents, and the owners and managers of the grounds where this event is held from and against any and all claims for loss, damages, liability, injury, or death, however caused, resulting directly or indirectly from the rider’s entry or participation in this competition or from acts or omissions of rider or rider’s agents. I further agree to be subject to the rules of the dressage club or other organization sponsoring this competition.

Rider Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

If Rider is under 18:

Parent or Guardian Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Owner Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

**For more information, call or text Brandi at 207- 281-2557, or [dressagesec@gmail.com](mailto:dressagesec@gmail.com)**

[www.mainedressage.com](http://www.mainedressage.com)