

IHA Dressage Clinic Registration Form

Raul A. de Leon

Saturday, April 24, 2021; Rain Date, Sunday, April 25, 2021

Bohemia Equestrian Center - 1369 Sycamore Ave. 9 a.m.

FEEES per person
IHA Member ONLY

SEMI-PRIVATE SESSION - 60 minutes

\$125

Name of Rider #1 _____
Rider's Level _____
Horse's Level _____
Address _____
Street Town State Zip
Phone # _____
Area Code # _____
Email _____

Name of Rider #2 _____
Rider's Level _____
Horse's Level _____
Address _____
Street Town State Zip
Phone # _____
Area Code # _____
Email _____

PRIVATE SESSION - 60 minutes

\$175

Name of Rider _____
Rider's Level _____
Horse's Level _____
Address _____
Street Town State Zip
Phone # _____
Area Code # _____
Email _____

AUDITING FEE for the day

\$35

Name of Auditor _____
Address _____
Street Town State Zip
Phone # _____
Area Code # _____
Email _____

TOTAL ENCLOSED

\$ _____

Please make check out to IHA. Remit registration form, payment, signed liability waiver, 2021 negative coggins to the following address no later than April 21, 2021:

Angela Pecora
919 Sycamore Avenue
Bohemia, NY 11716-3516
516.317.9890
haygal@haygal.com
ihaddressage@yahoo.com

Limited o 16 riders/8 sessions. A time schedule will be issued on 04/22.

Indicate AM_____ or PM_____ session here. We will try to accommodate.

We will be following NYS guidelines for Covid-19 if in affect.

SIGNATURE: _____ DATE: _____