

Registration Form

8/15/26 Valley Oaks Cavaletti Clinic with Erika Jansson @ PEC

Rider Information

Name: _____ Rider Age (if minor): _____

Riding Discipline: _____

Level of Experience: _____

Phone: _____ Email: _____

Horse Information

Name: _____

Age: _____ Height: _____ Color: _____ Breed: _____

Riding Discipline: _____

Level of Training: _____

Payment Information

Valley Oaks Chapter CDS Member: \$110 Membership #: _____

Pony Club Member: \$110 Membership #: _____

Non-Members: \$125

A **COMPLETE** Registration Packet Includes:

- Registration Form
- Erika Jansson Liability Release Form
- CDS Liability Release Form
- PEC Liability Release Form
- Payment

EMAIL all forms to valleyoaksdressage@outlook.com