



Alpena County Horsemen's Club Presents:

B & W Barrel Clinic

At the Alpena County Fairgrounds

Brian Bannerman – 7 Time Barrel and Pole World and National Champion

Will Eckert – 2 Time NBHA Reserve 1D State Champion,
2014 GG Barrel Racing Gold Medalist,
2015 NBHA 1D State Champion



The Alpena County Horsemen's Club is extremely excited to welcome Brian Bannerman and Will Eckert to Alpena for this clinic.

The following are the words of the clinicians:

“Our clinics are geared towards more of the horsemanship aspect of barrel racing.

We will break down the pattern into segments so you will be able to understand the mechanics of it. We do this through different exercises and drills. We do a ton of slow work, so you and your horse will be able to understand. We have the ability to switch gears from a seasoned barrel racer to the beginner just starting out. We work with you and your horse to figure out what style would be best for the two of you. We do not try to make you conform to “our style”. We will discuss bits and their purpose and may make recommendations. Our philosophy and goal are to have you succeed no matter what your goals are.”

Morning Session

Tack Discussion

Finding out what you and your horse know

Moving your horses body parts

Breaking down the pattern

Drills

Afternoon Session

Continue with drills and exercises

Putting a whole pattern together

Adding some speed

Make any necessary changes and refining your technique

Q&A during Lunch Break

Items to bring to Clinic:
Water & Hay for Horses
Saddle
Bridle
Riding Boots
Helmet

Lunch will be provided for attendees and Auditors
Drivers may purchase lunch for \$5

DEADLINE TO REGISTER FOR CLINIC

May 26, 2021

Space is limited, so get your reservation in early 😊

A daily prize will be drawn for one lucky participant or auditor



B & W Barrel Clinic

June 12th, 2021 – Youth

(10 yrs of age to 17 yrs of age)

June 13th, 2021 – Adult 18 & Over

9:30 a.m. – 5:00 p.m.

Maximum 15 riders per day

Registration – Adults \$120

Youth \$ 80

Audit Fee - \$15 / person per day

Name _____

Address _____

Phone _____

E-Mail _____

Make Checks Payable to: ACHC

C/O 10811 Hubbard Lake Rd.
Hubbard Lake, MI 49747



Alpena County Horsemen's Club Voluntary Release of Liability and Waiver of Legal Rights

Under the Michigan Equine Activity Liability Act, 1994 PA 351, an equine professional is not liable for an injury to or the death of a participant in an equine activity resulting from the inherent risk of the equine activity.

I, the undersigned, do hereby agree willingly and voluntarily to release Alpena County, Alpena County Horsemen's Club and B&W - Brian Bannerman and Will Eckert from any and all liability resulting from death, personal injury, property damage or property loss occurring as a result of my or my family's participation or participation of members of my family minor children guardian children, included in any event sponsored in whole or in part by ACHC. I fully indemnify Alpena County, ACHC and B&W for all claims legal or otherwise which I may have now or in the future resulting from negligence of Alpena County, ACHC and B&W, its members officers directors and/or volunteers in conjunction with my membership or Association-related events. I understand that equine activities are risky by their very nature and agree to undertake full responsibility for said risk on my own behalf, as well as on behalf of my heirs, administrators, personal representatives, assigns, children, and spouse, if any.

I further agree that this release and waiver constitute a waiver of liability beyond the provisions of the above-cited Michigan Equine Activity Liability Act. This release and waiver shall remain in effect for all claims arising under its terms for the entire duration of my membership, regardless of my or my child's level of participation in the Clinic or Association related events. I also agree that if any portion of this release and waiver is struck down by a court of law, the remaining terms shall remain binding.

My signature below is proof that I have carefully read this document and that I have had an opportunity to review it with my attorney or have voluntarily waived that right. I understand that I am waiving certain legal rights and I willing agree to do so.

Signature of Adult Members – Date

Signature of Parent or Legal Guardian

