



**Fill out the application and mail with:**

- 1) Current Coggins test and Rhino/Flu and Rabies Vaccine
- 2) Signed Release Form
- 3) Check for total amount due (Payable to "Kennebec Farm")



<b>Prices</b>	
Early Bird	After May 15th
<input type="checkbox"/> <b>2 Day Package \$275</b>	<input type="checkbox"/> <b>2 Day Package \$300</b>
<input type="checkbox"/> Saturday Group Jump \$150 <input type="checkbox"/> Sunday Group Jump \$150	<input type="checkbox"/> Saturday Group Jump \$160 <input type="checkbox"/> Sunday Group Jump \$160
<input type="checkbox"/> <b>Dressage Lesson \$120 (Private): _____ (limited spots available)</b>	
<input type="checkbox"/> <b>Dinner Saturday \$15</b>	
<b>Stabling: \$30 (overnight)</b>	<input type="checkbox"/> Friday <input type="checkbox"/> Saturday
<b>\$20 (day)</b>	<input type="checkbox"/> Saturday <input type="checkbox"/> Sunday
<i>Limited stabling is available -Owners are responsible for shavings, hay, feed, buckets and stall cleaning (buckets and forks available)</i>	
<i>Preferred Ride Time: AM PM</i>	

Rider Level	
Grasshopper (up to 2')	
Elementary (up to 2'3")	
Beginner Novice (up to 2'7")	
Novice (up to 2'11")	
Training Level (up to 3'3)	
Prelim (and up)	
Dressage Level:	



Mail to:  
 Kennebec Farm Dom Schramm Clinic  
 C/O Kathleen Bailey  
 236 Phipps Point Rd  
 Woolwich, Maine 04579

**Donuts and Coffee Available on Sunday**

Riders are allowed one "Groom" to Audit Free

Auditors: \$50 Weekend or \$30 one day

**Liability Release:**

**Kennebec Farm Release and Liability Form**

I understand and agree to the following: I understand that riding is a high-risk sport and am participating at my own risk. I hereby assume all risk and do further release and hold harmless the members and volunteers of Kennebec Morgan Farm and the owner, employees and volunteers of Kennebec for all liability for negligence resulting in accidents, damage, injury or illness to myself and to my property, including the horse on which I will ride in this event. Under Maine Law an equine professional has limited liability for an injury or death resulting from the inherent risks of equine activity.

Rider Name: \_\_\_\_\_  
 Signature (Rider): \_\_\_\_\_ Date: \_\_\_\_\_  
 Parent or Guardian: \_\_\_\_\_  
 Signature (Rider's parent if under 18 yrs) \_\_\_\_\_ Date: \_\_\_\_\_