



2018 LTED APPLICATION FORM

Date of Submission: _____ **Deadline for Submission: April 6, 2018**

Name: _____ **Date of Birth (mm/dd/yy) :** _____

Address: _____

Phone: (home) _____ **(cell)** _____ **Email Address:** _____

Previous Coaches you have worked with on a regular basis: _____

Horse's Name: _____ **Horse's Age:** _____

Owner's Name: _____ **Owner's Contact Number:** _____

MEMBERSHIPS REQUIRED:

NBEA membership required with this application as well HTNB

NBEA #: _____ **HTNB #:** _____

VACCINATIONS, COGGINS & FARRIER:

Vaccines Required: Flu, Rhino, Strangles

Coggins: Negative Coggins within past 2 years (Please note some shows on the optional list require it within one year).

Farrier Name and Frequency of shoeing: _____

EXPERIENCE (please check which applies to you)

Type of show experience:

Hunter/Jumper Equitation Dressage Horse Trials Schooling Shows None

Rider Eventing experience:

None Starter Pre-Entry Entry Pre-Training Training



Rider Level Attainment:

Rider Level achieved and date of achievement _____

Horse and rider combination have been coached over fences and demonstrate control.

Name of coach: _____ and date when last coached over fences _____.

Please enclose a letter of recommendation from coach stating they support your participation in the LTED program and believe you and your horse can safely compete at your desired level for the season.

Horse Eventing (cross country jumping) Experience:

None Starter Pre-Entry Entry Pre-Training

Note: Competition Applicants must provide a **show record** for proof of eventing competition experience.

RIDER ATTIRE, EQUIPMENT AND TACK

Yes, I have reviewed the attire, equipment and tack requirements for me and my horse with my coach and have or will purchase what is required to participate safely. This includes safety vest, approved helmet, gloves, boots with heel, crop, show jacket and shirt, breeches, well-fitted saddle and bridle, brushing boots, bell boots, saddle pads, and other tack that may be required for my horse (i.e. running martingale or xc bit)

EVENTING GOAL FOR 2017

Starter (less than 2') Pre-Entry (less than 2'4") Entry (2'6") Pre-Training (3")

Ability to be considered for the Atlantic Canadian Equestrian Championships – Eventing Team



PAYMENT

Cheque payable to NBEA for \$180 which covers the LTED camps, coaching at designated competitions, and some competition subsidies.

NOTE: If you wish to pay by Visa, submit your number below and there will be an additional service fee of \$3.

Mail, fax or scan to NBEA on or before March 31. At horses@nbnet.nb.ca Fax: 506-454-2363

900 Hanwell Rd Suite 13 Fredericton, NB E3B 6A2

I wish to pay by Visa or MC. My number is _____

Name on the card is _____

Expiry Date (MM/YY) _____

CVV _____

Signature: _____ Date: _____

CONSENT: (If the participant is under 18, Parent or Guardian must sign):

I _____ (parent/guardian if rider is under 18) acknowledge that I have read, understood and agree to the terms and conditions stated herein. I agree to allow my name and photo (my child's name and photo for riders under 18) to be used in NBEA publications and news releases as a participant in this program.

Signed: _____ Date: _____

Have you completed the following?

- Enclosed copies of memberships
- Enclosed letter of recommendation from EC coach
- Indicated ability to be considered for ACE Championships – Eventing Team
- Indicated Rider level achieved to date
- Indicate that horse is owned or available for the full program term
- Indicate necessary equipment has/will be obtained prior to the first camp (see list)