



2020 HTNB LTED APPLICATION FORM

Deadline date for submission: March 6, 2020

Submit by email to NBEAeditor@gmail.com

Name: _____ Date of Birth (dd/mm/yyyy): _____

Address: _____

Phone: (Home) _____ (Cell) _____

Email Address: _____

Coaches you have worked with on a regular basis: _____

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

Owner's Name: _____ Owners Contact No.: _____

Desired Tier (see LTED outline for specific requirements for each tier):

- Development Tier – Starter (12-22") & Pre-Entry (2'3")
- Competitive Tier 1 – Entry (2'9")
- Competitive Tier 2 – Pre-Training (3')
- Competitive Tier 3 – Training (3'3") & EV105

MEMBERSHIPS REQUIRED:

NBEA #: _____

HTNB #: _____

Competitive tier & anyone planning to compete also need Equestrian Canada Sport License (Bronze+):

EC#: _____

VACCINATION, COGGINS & FARRIER:

Mandatory, proof due 2 weeks prior to first LTED participation, see outline for deadlines..... Initial _____

- Flu, Rhino, Strangles, negative Coggins test dated 2020

Farrier Name and Frequency of Shoeing: _____

RIDER LEVEL ACHIEVEMENT & COACH SUPPORT

Highest Rider Level achieved and date of achievement:

Please enclose a letter of recommendation from your 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 – not required if the horse and rider participated in the LTED program last year.



EXPERIENCE (check all that applies)

Show Experience:

- Hunter/Jumper
- Equitation
- Dressage
- Horse Trials
- Schooling Shows
- None

Riders Eventing Experience:

- None
- Starter
- Pre-Entry
- Entry
- Pre- Training
- Training+

Horse Eventing (Cross Country Jumping) Experience:

- None
- Starter
- Pre-Entry
- Entry
- Pre- Training
- Training+

EQUIPMENT

- I have reviewed the required attire, equipment and tack requirements for me and my horse with my coach and have or will purchase what is required to participate safely. I recognize that the sport of eventing also requires a safety vest and, as always, an ASTM approved and well-fitting helmet.

AS OF 2019 safety vests must meet or exceed ASTM approved standard F1937 or BETA level

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.

Signature: _____ Date: _____

Have you completed the following:

- Enclosed Copies of Memberships
- Enclosed letter of recommendation from coach
- Indicated Rider Level achieved to date
- Acknowledge proof of vaccinations due 2 weeks prior to LTED participation



PAYMENT

Name of rider: _____ Name of horse: _____

Development
Tier: \$150

Competitive
Tier 1: \$175

Competitive
Tier 2: \$200

Competitive
Tier 3: \$250

Payment will only be processed if you are selected for the program.

Cheques made payable to NBEA may be sent by mail:

New Brunswick Equestrian Association, 900 Hanwell Road, Unit 13, Fredericton NB E3B 6A2

NOTE: If you wish to pay by VISA or Master Card submit your number below and there will be an additional service fee of \$3.00

Card Number: _____ Expiry Date (MM/YY): _____

Name on Card: _____ CVV: _____

Signature: _____ Date: _____