# Capital Region Equestrian Association (Zone 3) Presents:

# Western Rider Level Lecture Series!!

Join Zone 3 for a FREE 4 week Fall Lecture Series to learn all about Stable management and Western Rider Levels 1 through 4 from Equine Canada's Learn to Ride Program.

## **EVERYONE WELCOME!!**

#### **Lecture Dates:**

October 19th - Rider Level 1

October 26th - Rider Level 2

November 2<sup>nd</sup> - Rider Level 3

November 9th - Rider Level 4

November 16<sup>th</sup> - (Tentative) Rider Level Oral/Written Testing

<u>Time</u>: 6:30pm- 8:30pm

Location: Geary Hill Stables 31 New Rd Geary, NB

<u>Lecturer</u>: Amy Richford, a certified Equine Canada Western IOB Coach and horse trainer. Amy has many years of knowledge and experience with teaching students and training horses which she has attained in Cananda and the USA.

<u>Requirements</u>: completed registration form, liability waiver and 2015 NBEA membership. (NBEA membership is not required for parents who accompany their child.)

November 16<sup>th</sup> Written and Oral Rider Level Exams will be FREE testing offered if there is an expressed interest.

NOTE: \*\*Individuals are asked to sign up for the written/oral exams on the first night of the Lecture series.\*

# Western Rider Level and Stable Management Topics

# Rider Level 1

- Parts of the horse
- Horse Identification
- Care of the Horse
- Tack
- How to Saddle and Bridle

# Rider Level 2

- Teeth
- Vices
- Parasites
- How to Buy a Horse
- Horse Examination for Purchase
- How to Load and Transport your horse
- Conformation
- Unsoundness and Blemishes
- Western Horse Breeds

# Rider Level 3

- Preventative Health Care
- Emergency Care
- Common Diseases
- Bandaging
- Equipment

# Rider Level 4

- Stable Construction and Shelter
- Guide to Equine Nutrition
- Lunging

# Rider Level Lecture Series Registration Form

Please return registration form, waiver and proof NBEA to k grantdemetre@yahoo.com

Or mail to: Krista Grant-Demetre 86 Berkley Drive New Maryland, NB E3C 1C4

Any questions please email or call Krista at 472-5451

Registration deadline: October 16th, 2015

	Name:			Address:				
	Phone:			Email:				
	Age:			NBEA#:				
l.	l. Have you achieved any western rider levels?							
	If so what level?							
	a) If No, are you ir what level(s)?	nterested in p	ursuing yo	ur western rider levels and if yes				
2.	. Which rider level lectures are you attending? (Please circle all applicable)							
	1 2	3	4					

3. Would you like to purchase the Stable Management or any of the Rider Level books? If so, indicate which books.

Rider Level Books are \$10.00 each and the Stable Management book is \$42.00. All payments for books are to be made to the NBEA and cheques are to be made payable to the NBEA. Visit www.nbea.ca or call 454-2353. Books can also be purchased on site at the lectures via cheque, cash or credit card. The books are highly recommended to help with preparation for the testing, however are not required to participate.

4. Please indicate if you are attending the Written/Oral Exam November  $16^{\rm th}$ . Yes or No

(\*\*all interested must sign up on the first night of the lectures\*\*)

- a) If you would like to be tested on the riding portion of the test please indicate Yes or No
- b) If yes, would you be interested in a group testing day at a future scheduled date and time?

Please Note: This is a lecture series with some hands on instruction with horses, which will be provided by Geary Hill Stables.

Light refreshments will be provided at each lecture series please advise of any food allergies.

WE LOOK FORWARD TO SEEING YOU THERE!!

### ACKNOWLEDGMENT of RISK and RELEASE of LIABILITY – "For Participants 18 or Older"

#### **Please Print Clearly**

Participant's Name:		Date of Birth:				
Address:		City:	Prov:	Postal:		
Every	Person must Read and	Understand this form before	e Participating in	<b>Equine Activities</b>		
_		sociation, their zone represent ees and volunteers. (all of the		members and volunteers, Geary Hill Stables, lled the HOST)		
Initial ead	ch item below After Read	ing and Understanding the ite	rm .			
1.	I Understand there are Inherent DANGERS, HAZARDS and RISKS, (collectively called RISKS) associated with Equine Activities and injuries resulting from these "RISKS" are a common occurrence.					
2.	_	Inherent "RISKS" of Equine ctivities, including but not l		hose DANGEROUS conditions which are an		
•		uine to behave in ways that n with, bite or kick other anim	-	ry, harm or death to persons on or around them ects.		
•		n equine's reaction to such th animals and hazards such as	-	dden movement, tremors, vibrations, unfamilia s.	r	
•		articipant (s) to act in a neglig act within their ability or to n		night contribute to injury to themselves or wer an equine.		
3.		ally Assume All Responsibility amage or loss resulting from 1	-	t " <b>RISKS</b> " and the possibility of personal Equine Activities.		
4.	I Acknowledge that it rand to Participate Within		<b>ty</b> to act in such a	manner as to be responsible for my own safety		
5.		ation given for my Participa gns (collectively called my '		ivity, I and my heirs, executors, atives") agree		
•	To Release the "HOST" Representatives" might s NEGLIGENCE ON THI	uffer as a result of my Partici E PART OF THE "HOST"; ar	or any loss, damag pation due to any nd	ges, injury, or expense that I or my "Legal cause whatsoever including any and all liability for property damage or personal		
•	Before signing this form		initials above) and	uine Activities. I I stated that I understand it. I know that tives" might have against the "HOST".		
SIGNED	This	day of		2015		
(Signatur	e of Participant)					

## $ACKNOWLEDGMENT\ of\ RISK\ and\ RELEASE\ of\ LIABILITY-``For\ Participants\ \underline{Not\ 18\ Years\ Old}"$

#### **Please Print Clearly**

Participa	ant's Name:Date of Birth:
Address	:Prov:Postal:
Guardia	n's Name:Date of Birth:
Guardia	n's Address: Prov: Postal:
The Gua	ardian must Read and Understand prior to the Participating in Equine Activities
-	oital Region Equestrian Association, their zone representative, committee members and volunteers, Geary Hill Stables, perty owners, their employees and volunteers. (all of them collectively called the HOST)
Initial e	ach item below After Reading and Understanding the item
1.	I am the Parent and/or Legal Guardian of the Participant named above and am executing this form on behalf of the Participant in my capacity as parent and/or guardian and with the intent that this form be binding on myself and Participant for all legal purposes.
2.	I Understand there are Inherent DANGERS, HAZARDS and RISKS, (collectively called RISKS) associated with Equine Activities and injuries resulting from these "RISKS" are a common occurrence.
3.	I Acknowledge that the Inherent "RISKS" of Equine Activities mean those DANGEROUS conditions which are an integral part of Equine Activities, including but not limited to:
•	The propensity of any equine to behave in ways that might result in injury, harm or death to persons on or around them and to potentially collide with, bite or kick other animals, people, or objects.
•	The unpredictability of an equine's reaction to such things as sounds, sudden movement, tremors, vibrations, unfamiliar objects, persons or other animals and hazards such as subsurface objects.
•	The potential for other participant (s) to act in a negligent manner that might contribute to injury to themselves or others, such as failing to act within their ability or to maintain control over an equine.
4.	I Freely Accept and Fully Assume All Responsibility for the Inherent "RISKS" and the possibility of personal injury, death, property damage or loss which might result from the child being a Participant.
5.	<b>I Acknowledge</b> that it remains my <b>Sole Responsibility</b> for the safety of the Participant and for the child to Participate within his/her own limits.
6.	In addition to consideration given for the child to Participate in Equine Activity, I and my heirs, executors, administrators and assigns (collectively called my "Legal Representatives") agree
•	To Waive All Claims that I or the Participant might have against the "HOST"
•	To Release the "HOST" from Any and All Liability for any loss, damages, injury, or expense that I, the child Participant or our "Legal Representatives" might suffer as a result of the child's Participation due to any cause

• To HOLD HARMLESS AND INDEMNIFY THE "HOST" from any and all liability for property damage or

including any NEGLIGENCE ON THE PART OF THE "HOST"

•	Before signing this form I read it (as indicated by my initials above) and I stated that I understand it. I further state I
	am aware that signing this form, waives certain legal rights I and/or the Participant and/or our "Legal Representatives"
	might have against the "HOST"

personal injury to the Participant or to any third party which might result from the child's Participation.

SIGNED This	day of	20	
(Signature of Participant)	(Signature of	(Signature of Parent/Guardian)	

Do Not Sign until you Understand All Items Above