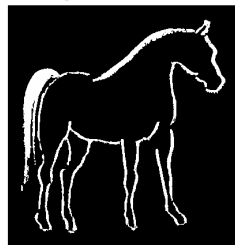
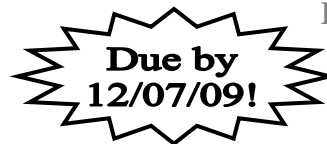


E Q U I N E[®]



A F F A I R E

EQUINE AFFAIRE CLINIC APPLICATION
February 4-7, 2010
Fairplex, Pomona, CA



Name of Rider: _____ Age (if junior): _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: (Day) _____ (Evening) _____

On-site Cell Number: _____ Email: _____

Name of horse's owner (if different than rider): _____ Phone: _____

Breed of Horse: _____ Age: _____ Sex: _____ Name: _____

Is your horse broke to ride? _____ If not, what training has your horse received? _____

In what discipline(s) do you ride your horse? _____

In what division(s) and at what level(s) do you compete? _____

For which clinic(s) do you wish to apply? You may apply for as many clinics as you wish.

Clinician _____ Day & Date _____ Time _____

Clinician _____ Day & Date _____ Time _____

Clinician _____ Day & Date _____ Time _____

Clinician _____ Day & Date _____ Time _____

PLEASE RETURN AN APPLICATION PACKET INCLUDING THE FOLLOWING:

- A completed Equine Affaire Clinic Application
- Information or materials for specific clinic(s) as identified in the enclosed clinic summaries
- Check made payable to "Equine Affaire, Inc." in the amount of the clinic fee(s), which are listed with each session in the clinic summaries. Checks for accepted participants will not be deposited before January 1, 2010; checks will be returned to riders who are not selected.
- A \$35.00 fee will be charged for any check returned for insufficient funds, closed account, or any other reason. Payment to cover original check amount plus this returned check fee must be made by bank cashiers check. Late payment fees may also apply.

NOTE: When applying for more than one clinic, you must include a separate check for each clinic and send a separate video for each clinician with whom you are applying to ride.

Application packet must be received no later than December 7, 2009, to:
Paula Woodward
Equine Affaire, Inc.
2720 State Route 56 SW
London, OH 43140

Participants will be offered one (1) daily admission pass to Equine Affaire and 24 hours of stabling for each clinic in which they participate. Participants are responsible for their own bedding. Additional stabling is available for \$40/night. Please call Paula Woodward at (740) 845-0085 ext. 109 or email her at pwoodward@equineaffaire.com with any questions.