

**JANUARY 21, 2017**  
**Private Clinics 8-11**  
**Clinics: 12-4**  
**Awards/Dinner 4-6**



**Flying Cloud Farm**  
**1200 Jacobsen Lane**  
**Petaluma CA 94954**  
[www.flyingcloudfarm.com](http://www.flyingcloudfarm.com)

# **REGION II EDUCATION CLINIC AND HIGH POINT AWARDS/DINNER**



**Mary Mc Cormick**



**Cassidy Palmer**



**Kimberly Palmer**



**Patrick Stevens**



**Kendel Edmunds**



**Shannon Grossi**

## **CLINICS**

### **ADULT TRACK:**

- Through the Eyes of a Judge
- Question and Answers
- Hair for the Vaulting Ring
- Making Vaulting Leggings/Unitards
- CompWeb
- Music.

*This track will be appropriate to both parents and coaches and other adults supporting vaulting programs.*

### **VAULTER TRACK:**

- Drills and Skills for Improving Compulsories
- Freestyle Design
- How to Improve your Freestyle Score
- Pas de Deux and Team Participation
- Gymnastics for the Vaultler
- Fitness and Nutrition for Success.

*Each vaultler will work on barrels and have at least one horse session with a clinician. Emphasis will be placed on horsemanship and partnering with your horse.*

**Dinner:** Three types of pasta, salad, garlic bread, water, and desert

**High Point Awards** to be presented during dinner

## **Fees**

**PAID PRIOR TO 1/9** Vaultler Track \$50  
Adult Track \$30  
Private 45 min. clinic \$30  
Dinner \$10

**PAID AFTER 1/9** Vaultler Track \$60  
Adult Track \$40  
Private 45 min. clinic \$40  
Dinner \$15

# Registration Form

*One form per participant*

Reservations, Payments (checks made payable to **AVA Region II**), and Signed Release forms (all participants - adults and minors must sign release before participating in clinics) are to be mailed to Kelley Holly 1 Liberty Rd. Petaluma CA 94952.

	by 1/9	after 1/9
Vaulter's Name: _____	\$50	\$60
Vaulter's Club: _____		
Vaulter's 2017 competition level: _____		
Vaulter's Email contact: _____		
Adult's Name: _____	\$30	\$40
Adult's Club: _____		
Adult's role within club: _____		
Adult's Email contact: _____		
# _____ Dinner Reservations # of dinners x \$10/\$15 TOTAL _____	_____	_____
Private Sessions for (name of vaulter) _____	\$30	\$40
<p><i>Sessions will be on first come first serve, if there is room you may sign up for more than one session or in the case of a team you may utilize more than one clinician by paying for each clinician's time.</i></p>		
<p><b>1ST CHOICE:</b></p> <p style="padding-left: 40px;"> <input type="checkbox"/> Kendel Edmunds                        <input type="checkbox"/> Mary Mc Cormick,                        <input type="checkbox"/> Cassidy Palmer  <input type="checkbox"/> Kimberley Palmer                        <input type="checkbox"/> Patrick Stevens                 </p>		
<p><b>2ND CHOICE:</b></p> <p style="padding-left: 40px;"> <input type="checkbox"/> Kendel Edmunds                        <input type="checkbox"/> Mary Mc Cormick,                        <input type="checkbox"/> Cassidy Palmer  <input type="checkbox"/> Kimberley Palmer                        <input type="checkbox"/> Patrick Stevens                 </p>		
<p><b>3RD CHOICE:</b></p> <p style="padding-left: 40px;"> <input type="checkbox"/> Kendel Edmunds                        <input type="checkbox"/> Mary Mc Cormick,                        <input type="checkbox"/> Cassidy Palmer  <input type="checkbox"/> Kimberley Palmer                        <input type="checkbox"/> Patrick Stevens                 </p>		
<b>TOTAL (pay to AVA Region II)</b>		

**Any questions:**  
**Contact Kelley Holly at [tambourine-farm@att.net](mailto:tambourine-farm@att.net)**

# FLYING CLOUD FARM, Inc.

1200 Jacobsen Lane, Petaluma, CA 94954 (707) 765-4433

## WAIVER OF CLAIM FOR INJURY OR DAMAGE

The undersigned understands that horse stabling, training, exercising, riding, and vaulting are by their natures dangerous activities and can result in serious injury. The undersigned, therefore, hold Flying Cloud Farm, Inc., its agents, servants, employees, Jim Bell, Jeannette Bell and the owners of the premises free from any and all liability for personal injury, property damage or otherwise, occurring by reason of stabling, training, exercising, vaulting and riding, pursuant to the contract simultaneously signed herewith for any reason whatsoever except only for willful wrongdoing by the actual wrongdoer.

The undersigned has inspected the stable, indoor riding ring, outdoor riding rings, paddocks, trails, and the remainder of the premises of Flying Cloud Farm, Inc., and accepts them in their natural condition, understanding that by reason of their natures they may have either hidden or obvious defects. The undersigned agrees not to hold Flying Cloud Farm, Inc. liable for any injury to persons, animals, or property caused by reason of any such defect. The undersigned Owner/Rider/Vaulter has inspected the footing and agrees to undertake only those activities that he/she deems appropriate for the condition of the footing. The undersigned Owner/Rider/Vaulter agrees to hold Flying Cloud Farm, Inc., its successors, officers, directors assigns, agents, employees, and family harmless from any liability arising out of the use of said facilities. The undersigned also agrees to accept financial responsibility for any property damage caused by himself, his invites, or his horse(s).

The undersigned also understands that horses are prone to illness, lameness, and other conditions, and holds Flying Cloud Farm, Inc., its agents, servants, employees, Jim Bell, Jeannette Bell, and the owners of the property, harmless from any liability in connection with any such occurrence and will not be entitled to any abatement of rent or other compensation by reason of aforesaid.

The undersigned represents that he will undertake only those horse riding activities which he is competent to perform and will not permit any other person to use the undersigned's horse unless he is certain that said person is competent to do so, and that person has been approved by and signed a liability release for Flying Cloud Farm, Inc.. The undersigned, therefore, releases Flying Cloud Farm, Inc., its agents, servants, employees, Jim Bell, and Jeannette Bell, from any liability whatsoever for personal injury or property damage to the undersigned or any person on the premises for horse riding or other purposes with permission of the undersigned, whether or not the undersigned or such person is under instruction by any other person at the time of such injury or damage.

The undersigned further understands that Flying Cloud Farm, Inc. is a corporation whose sole asset is a lease of the premises and is under no obligation to provide insurance for the undersigned, his invites, animals or property. In the event that the undersigned chooses to leave saddles, tack, or other property on the premises, Flying Cloud Farm, Inc. may, at its discretion, permit him to do so as an accommodation only, but the Farm and the owners of the property shall not be responsible for theft, loss, or damage to any such property.

NAME (print)

DATE

SIGNATURE

ADDRESS

PHONE

EMAIL

Signature of parent if participant is under 18

Name of Parent (print)

Signature of parent if participant is under 18

Name of Parent (print)