

◆ **New Hampshire Dressage & Eventing Association.** ◆

NHDEA Presents a Poles and Cavaletti with

Kyle Fernald

17 July 2021 - Saturday

Clinic Contact: Karen O'Malley 603-382-7044

Hosted by Irish Pleasure Farm, 11 Maple Ave. Newton, NH

Opening Date: Monday June 14, 2021

Closing Date: Monday July 12, 2021

NHDEA is pleased to offer a clinic with Kyle Fernald.

Poles and cavalettis are not only fun for the horse and rider, but are great for gymnastic exercises as well. We will focus on the proper use of cavalettis in training to strengthen the horse's hind leg, increase flexibility, coordination, and improve rhythm. Cavalettis change-up the daily training, keeping the horse more engaged and happy.

Kyle has had a three year internship with Dr. Cesar Parra developing horses up thru the levels and helping riders attain their goals, always putting the welfare of the horse first. Kyle has also trained with other top riders such as Ben Con, Tina Konyot, Volker Morris, Anne Gribbons, and Charlotte Brehdahl. Kyle's goal as a trainer is to develop better communication between horse and rider.

Spaces are limited, so please sign up early. Preference will be given to Members.

<u>Member</u>	<u>Non-Member</u>	
\$65.00	\$75.00	60 Min Semi-Private (2 or 3 riders)

- Helmets must be worn at all times while mounted. SEI/ASTM helmets are recommended.
- Enclose a copy of negative Coggins Test within 1 year.
- No refunds unless space can be filled from the waiting list.
- Only ONE horse/ rider combination per each form. Priority is given to NHDEA members.
- Auditors are welcome - there is a \$10.00 fee.
- There can be one groom per horse.
- Times will be available from Karen O'Malley or our new website www.NHDEA.org
- Auditors are welcome - there is a \$10.00 fee.

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NAME OF RIDER _____ LEVEL OR INTEREST _____

NAME OF HORSE _____ LEVEL OR EXPERIENCE _____

STREET _____ TOWN _____ STATE _____

ZIP _____ HOME TEL (____) _____ WORK TEL (____) _____

TRAILORING WITH _____

I agree to hold New Hampshire Dressage and Eventing Association and the owners and operators of the host facility and any and all employees free from any and all claims and demands of any nature that may be occasioned by me or those in my charge, or horses entered by me, and agree to abide by the rules and to accept all decisions rendered by the clinic instructor and/or the owners/operators of the host facility and the Southern New Hampshire Dressage and Eventing Association. My signature constitutes an acceptance of this waiver.

SIGNATURE OF RIDER (parent or guardian if under 18 yrs old) _____ DATE _____

Mail the lower half of this form along with a Coggins Test, and EHV-1 vaccination, your signed check (payable to NHDEA), and the signed Release Liability form to:

Karen O'Malley, 11 Maple Avenue, Newton, NH, 03858

Member: _____ Non-Member Dressage: _____
TOTAL Amount Enclosed: _____