

# 2017 Northern District 4-H Dressage Qualifying Fix-a-Test Clinic

**June 10, 2017 (Rain date June 11)**

**Purpose:** To provide an opportunity for our 4-H dressage riders to ride a test of their choice while being observed, evaluated, and guided by a USDF Bronze / Silver Medalist and USDF certified clinician. Successful completion of their session with the clinician will qualify the horse/rider combination for the State Show.

**Location:** Step-At-A-Time Farm, 16325 Oakland Rd, Reva VA 22735-1827

**Clinician:** Erin Sweeney

**Date:** June 10, 2017

**Closing Date:** May 16, 2017

**Number of Participants:** This clinic will be limited to 16 horse/rider combinations. Time slots will be given in the order applications are received and will be emailed prior to June 10. The clinic will begin at 9 a.m. and at least fifteen minutes given to each participant to work with the clinician.

## **Rules for Participation:**

1. All participants must be bona fide 4-H horse project members. All animals must be their 4-H Project animals, registered with their respective Extension Unit and part of their Horse Project Record.
2. Participants must meet all county and state 4-H regulations for entry to the State 4-H Horse Show.
3. Any **incomplete application** will be returned and applicant not accepted.
4. Fix-a-Test Clinic **Requirements**
  - a. Participants must be prompt and ready to begin at appointed time. Failure to arrive on time, or after the fifteen minute period begins, will limit the amount of time the clinician will spend with the participant.
  - b. Show attire and tack is required.
  - c. Choice of Test (one only) must be selected from class list for the 2016 State Show. (Intro Level Test C; Training Level Test 1, Test 2, or Test 3; First Level Test 1). Dressage Tests are available at <https://www.usef.org/compete/resources-forms/disciplines/dressage>
5. Clinician's signature on the score sheet will be sent to the proper office. Copies of the score sheet will be available to participants.
6. Applicants must submit copies of their **health form, equine waiver, and current Coggins with application.**
7. Horse measurement is available on request at the Clinic.
8. Cost: \$20

**Please email application to [E7Aquila@aol.com](mailto:E7Aquila@aol.com) or mail to 2972 BeauMont Farm Road, Charlottesville, VA 22901.** For more information, please contact Eleszabeth at the above email address or (434) 978-2101. Day of show *only* contact: 434-989-2143

## 2016 Northern District 4-H Dressage Qualifying Fix-a-Test Clinic APPLICATION

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

Birthdate \_\_\_\_\_

4-H Club \_\_\_\_\_

District \_\_\_\_\_

Name of Horse \_\_\_\_\_ Height \_\_\_\_\_

Please circle this statement if the horse needs a measurement card.

Choice of Test \_\_\_\_\_

*Please note: Each horse/rider combination can only exhibit at one Qualifying event. Do you plan to use this clinic to qualify for the State Show?* \_\_\_\_\_

**Signatures:** I agree to participate under the rules of 4-H and this clinic and agree that neither the event nor sponsors will be held responsible for any accident or injury to the person or property of any participant or other person. The participant agrees to indemnify the event organizers and Elmwood Farm Equestrian Center against any claim or liability for damage caused by participant or their animal. The applicant and/or representative hereby agree to abide by all rules for this 4-H Event including the entry system. Participant and parent or guardian hereby attest that they have read the rules for this event and that this applicant and entry meet all rules and regulations for this event.

Signature of **PARTICIPANT** \_\_\_\_\_

Signature of **PARENT/GUARDIAN** \_\_\_\_\_

Signature of **CLUB LEADER** \_\_\_\_\_

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Date Received \_\_\_\_\_ Time Slot \_\_\_\_\_



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