

# Classical Dressage Clinic



with Toi Trent

## A Benefit for Dream Riders

*A Professional Association of Therapeutic Horsemanship Intl. Premier Accredited Center*



Date: Saturday May 20, 2017

Location: Red Bank Arena, Lexington, SC

Toi has earned her USDF Bronze and Silver Medal. She has mentored under Charles de Kunffy and completed his East Coast Instructor Program in 1999. Toi's teaching methodology develops confident riders and 'happy' horses. Correct, focused riding results in the rider's positive influence on the athletic development of the horse.

Toi enjoys working with all levels of riders from beginners to advanced; riders that ride for their own enjoyment and those that are serious about competing. She currently competes at the FEI level.

### CLINIC REGISTRATION

\$70 FOR A PRIVATE LESSON

*Clinic filled on first-come first-serve basis. If you wish to participate in the clinic and schooling dressage show ride times can be worked out to make that possible.*

*Checks made out to Dream Riders and mailed to 156 Sandy Hill Rd. Lexington, SC 29072*

*All proceeds to Benefit Dream Riders*

**RIDER NAME:** \_\_\_\_\_ **RIDER LEVEL:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

\_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**HORSE NAME:** \_\_\_\_\_ **HORSE LEVEL:** \_\_\_\_\_

*For further information contact Dream Riders (803) 957-7906 or [dreamr2@mindspring.com](mailto:dreamr2@mindspring.com)*

**\*\* Helmet Rule Applies to this event\*\*** ASTM/ SEI certified headgear must be worn at all times when mounted.

Under South Carolina Law, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in an equine activity resulting from an inherent risk of equine activity, Pursuant to Article 7, Chapter 9 of Title 47, Code of Laws of South Carolina, 1976.

I hereby release the sponsor Dream Riders, Tazma Toi Trent, and Lexington County Recreation Department, their officers, members and assigns at this show of any and all responsibility for theft, injury, or death of horse, owner or exhibitor and theft of belongings. I also assume and accept full responsibility for myself, my family members, my attendants and any damages and/or injury done by me or my horse.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed: \_\_\_\_\_

Signature of Parent/Guardian (if under 18): \_\_\_\_\_