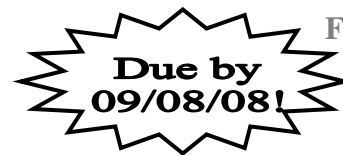


EQUINE AFFAIRE CLINIC APPLICATION
November 13-16, 2008
Eastern States Exposition, W. Springfield, MA



Name of Rider _____ Age (if junior) _____
 Street Address _____
 City/State _____ Zip _____
 Phone (day) _____ (evening) _____
 On-site cell number: _____ E-mail address: _____

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

Breed of Horse _____ Age _____ Sex _____ Name _____

Is your horse exhibiting in the Breed Pavilion or the Horse & Farm Exhibits at the 2008 Equine Affaire? _____

If so, with what breed? _____

Is your horse broke to ride? _____ If so, 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?

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 September 1, 2008; 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.*

Send application packet no later than September 8, 2008, to:

Nicole Taylor
 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 Nicole Taylor at (740) 845-0085 ext. 123 or email her at ntaylor@equineaffaire.com with any questions.

WARNING: Under Massachusetts law, an equine professional is not liable for an injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities, pursuant to section 2D of chapter 128 of the General Laws.

[For Office Use Only: Date Received: _____ Check #'s: _____ Video: Y / N Picture: Y / N]