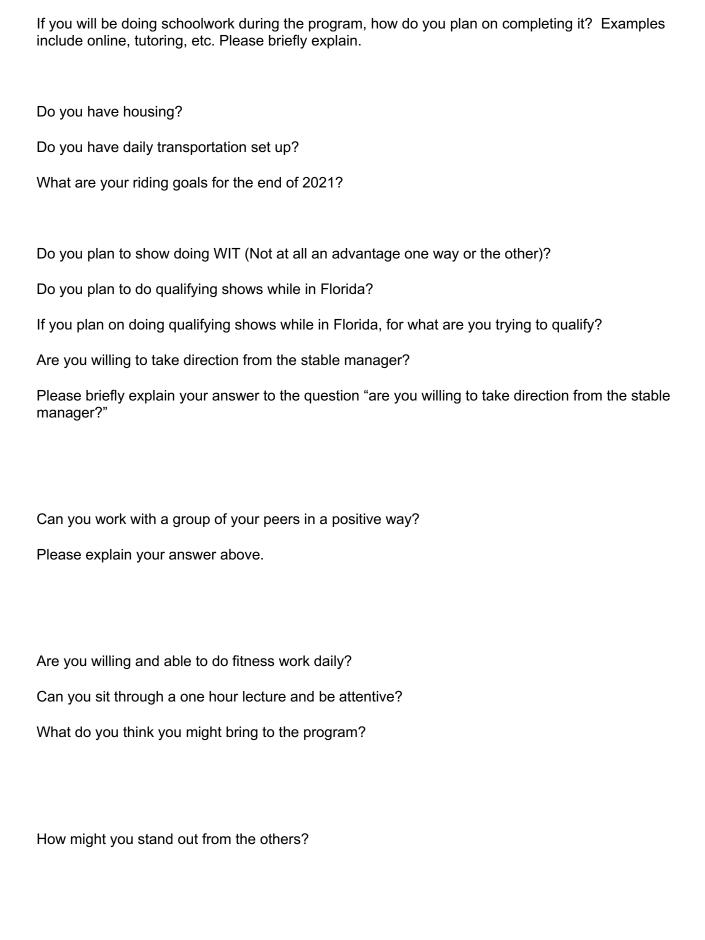


APPLICATION FOR D4K'S WINTER INTENSIVE TRAINING PROGRAM

| Name: |
|--|
| Birthdate: |
| D4K TEAM member? |
| Address: |
| Email: |
| Phone: |
| Parent or Guardian's Name: |
| Parent or Guardian's Email: |
| Parent or Guardian's Phone: |
| Trainer's Name: |
| Trainer's Email: |
| Trainer's Phone: |
| Tell us about the horse you want to bring to the clinic, Include his strengths and his weaknesses. |
| We will check centerlinescores.com for your competition record. Is there anything you would like to add? |
| Do you plan on attending all three months?(Preference is given to riders who stay three months.) |
| Will you be doing schoolwork during the program? |



In twenty years what would you like to be doing with your riding?

Why should you be selected into this program and what do you hope to gain?

Please provide a video (youtube link) of you and your horse. It need not be formal. This will help us get a sense of your riding and where you are at.

On acceptance into the program you will be expected to pay half of the first month's fee. The second half will be due December 1. Do you agree to make prompt payments in accordance with our payment policy?

Signature of Applicant

Photo Usage Policy

Dressage4Kids often takes photographs and videos during its events and activities. Dressage4Kids may use these photographs and videos for general publicity and programming purposes, including to raise funds. Pictures may appear on the website, on the Dressage4Kids Facebook page, in newsletters, and in other print and digital marketing materials. In addition,

participants' names may be used to recognize individual achievement in marketing materials.