



IC Frith & Associates Qld Young Riders Dressage Training Camp April 5th & 6th 2014 QSEC – Barr Oval

THIS CAMP IS OPEN TO ALL YOUNG RIDERS OF QLD ON A FIRST IN FIRST SERVE BASIS

Registration closes 7th March 2014

Run by DQ YR Sub committee

About the Camp

EACH DAY'S PROGRAMME BEGINS AT 6.30AM

Two private lessons, one each day

We have chosen coaches who compete Nationally up to Grand Prix Level and whom we know many riders would welcome the opportunity to train with and don't have regular access to them. They bring with them a wealth of knowledge and experience, and we thank them for being part of the 2014 Young Riders Camp.

YR Squad coach - Rozzie Ryan;

Non Squad Coaches - Emma Flavelle; Jenny Gehrke; Nicole Tough

Two Sessions of Pilates

Pilates is a form of postural training which riders is of great value for riders, especially dressage, because it strengthens the core muscles and increases joint flexibility. The stronger we are in our core muscles, the suppler we are in our joints, the stronger our seat becomes with less reliance on our hands – we develop a seat that is completely independent of our hands - **Dr Danielle Keogh**

• **WORKSHOPS:** (topics may alter without notice)

Riding and Competing in Germany- **Emma Flavelle**Goal Setting and Young Rider Pathways- **Jenny Gehrke**Veterinary discussion – 'Lameness in the Dressage Horse & preventative measures' – **DR Paula Williams BSc (Hons) BVSc MRCVS**

Also Included

Lunch for riders both days
Saturday Evening BBQ (Parents Included)
Stabling for your horse (additional fee of \$50.00 if stabling Friday night)
Powered camp site
Saturday evening entertainment for all riders
An opportunity to spend a weekend with some terrific coaches, mentors and current Qld Young Rider Squad members

Parents are welcome to sit in on ALL the workshops.

The cost of the camp for non-squad members will be \$375.00

Camp registration forms can be emailed or faxed to:

Kim Tenkate-cullen millewa01@bigpond.comFax: 0754470590

Or phone - 0418 715 377

2014 Qld Young Riders Training Camp Registration Form

Rider Name:
EA Membership No:DOB:DOB:
Address:
Contact:Email:
Arrival Date:Time:Time:
Horse Name:Gelding/Mare
Parent/Guardian (if under 18)
Signature:
Number of people for BBQ:
Special Dietary Requirements:
PAYMENT DETAILS
Mastercard/Visa
Name on Card:
CARD NUMBER:////
Exp Date:CCV
Amount \$Signature:
Please note that if you wish to arrive on Friday 4 th April. it w

Please note that if you wish to arrive on Friday 4th April, it will be an extra \$50.00

Email completed registration form to millewa01@bigpond.com or Fax to 54470590

Member Release and Waiver of Liability						
Full Name of Particip under 18):	eant (and Guardian if					
Address:						
State:		Postcode:				
Name of Club/Orga	nisation: Dressage Q	ld YR Sub Committee				
Address of Event / Activity: DQ YR Training Camp						
	QSEC, Bee	rburrum Rd, Caboolture Q				
understand, acknowl	edge and accept that:		sport activities, I, the undersigned,			
 Horse sports are a dangerous recreational activity and horses can act in a sudden and unpredictable (changeable) way, especially if frightened or hurt. There is a significant risk that serious INJURY or DEATH may result from horse sport activities. I knowingly and freely assume all such risks, both known and unknown, and I voluntarily PARTICIPATE at my OWN RISK and assume sole responsibility for any injury, death or property damage I may suffer that arises from my participation in horse sport activities. I understand and acknowledge the dangers associated with the consumption of alcohol or any mind altering drugs before and during the activities and I take full responsibility for any injury, loss or damage associated with their consumption. I agree not to drink alcohol or take drugs prohibited by law before or during any horse sports activities. I agree to follow the directions of any event organiser or official and that any misconduct or refusal by me to follow any direction of any organiser or official can result in the CANCELLATION of my participation in the activities and my immediate removal from my horse NO MATTER where that may occur. I understand that any such non-compliance may result in injury, death and/or permanent disability as a result of my failure to comply. I agree to wear a helmet at all times whilst riding where this is required under the relevant EA and FEI rules and regulations and agree that I am solely responsible for ensuring that whilst riding I wear a suitable helmet at all times where required under the relevant EA and FEI rules and regulations and take sole responsibility for my actions. I have had sufficient opportunity to read this assumption of risk agreement, fully understand its 						
terms and si	gn it freely and volunta	rily.	DATE:			
			DATE			
	SUARDIAN(if under 18		DATE:			
	ept ALL OF THE ABOV		this participant, acknowledge, o my minor child's involvement or			