



Jumping Clinic with Cherie Gaebel

Sunday, April 27, 2008

Warwick Hill Farm, Elverson, PA



OVCTA is proud to host Cherie Gaebel, of Elverson, PA. Cherie is a graduate “A Pony Clubber” and a current Level IV National Examiner. She has experience in eventing, hunters and jumpers. In 2007, she was the winner of the Jumper Classic at the Ludwig’s Corner Horse Show. Cherie has 20-years experience as an instructor and trainer. Riders of all levels, from beginners through advanced, benefit from her experience, both at her farm in Elverson, and in clinics through out the United States and abroad.

Clinic Format: Lessons will be 90-minutes, with no more than 5 riders per group. The lesson will utilize gymnastic exercises (from poles up to 3’6” depending on the group) to improve balance, rhythm, and adjustability of striding over fences. An ASTM approved helmet must be worn at all times. Riders should be dressed appropriately and come equipped with a proper bit, spurs, gloves, boots, running martingale (if necessary) and stick. To maximize their lesson, riders should be warmed up on the flat at their scheduled time.

Fees :

OVCTA Members	\$45, includes one groom’s pass
Non-OVCTA Members	\$55, includes one groom’s pass
All Entries after closing date	\$10 additional late fee
OVCTA Auditors:	OVCTA Members \$10 full day, \$5 half day (payable-day of clinic)
Auditors:	Non OVCTA-members-\$15 full day, \$10 half day (payable day of clinic)

Mail completed form, signed OVCTA release, check and coggins to:
Annemarie Cochrane
861 Nantmeal Rd
Elverson, PA 19520

Times will be e-mailed by Thursday, April 24th, 2008. For directions and more information contact Annemarie Cochrane at: Amcochrane1@aol.com .

Cancellation Policy: Refunds will only be given if you cancel prior to April 20th and your spot can be filled.

Opening Date: Thursday, March 27th, 2008

Closing Date: April 20th, 2008



CHERIE GAEBEL CLINIC - ENTRY FORM

RIDER NAME _____ DATE OF BIRTH _____

HORSE NAME _____

LEVEL OF HORSE (be specific) _____

LEVEL OF RIDER (be specific) _____

STREET _____ TOWN _____ ZIP _____

PHONE # _____ EMAIL _____

I am an OVCTA Member: Yes _____ No _____

OVCTA ACKNOWLEDGEMENT AND RELEASE

I enclose herewith a total of \$_____ for the aforementioned entry, which is made at my own risk and subject to the conditions of the organizer and the sponsoring Oley Valley CTA. I agree to abide by the rules which cover this event as set forth by the United States Equestrian Federation.

RELEASE : I understand that this is a high risk sport and I am participating at my own risk. I hereby release and hold harmless the Organizer, Organizing Committee, judges and officials, the Oley Valley CTA, their officers, agents and employees, the host and property owners from and all accidents, damages, injury, loss or illness to horses, owners, riders, employees, attendants, spectators or any other person or property loss suffered during or in connection with this event.

IMPORTANT: You assume the risk of equine activities pursuant to Pennsylvania Law.

NOTE: Parent or guardian must sign if competitor is under 18

SIGNATURE: _____

Entries will only be accepted if completed with signature, full payment and Negative Coggins Test within one year of date of clinic.