

**Show Me Thunder Drill Team Clinic
at The Missouri Equine Celebration
Boone County Fairgrounds
Columbia, MO**



The Show Me Thunder Drill Team will be hosting a clinic on Sunday, Jan 23, 2011 at 1:00 p.m. The Thunder will perform a short routine at 1:00 p.m followed by a saddle based clinic.

Areas covered in the clinic:

Basic Drill Team Moves
Desensitization of Flags & Audience
Developing the Drill Horse Stamina
Working as a Team

The purpose of the clinic:

Introduce riders to the sport of drill
Introduce riders to basic drill moves
Teaching horses and riders to work in close quarters
Encourage riders to start a competitive drill team in their barn, saddle club, or 4h group

Clinic will be limited to 8 participants (either riding their own horse or a team provided horse) Horses MUST be able to work closely with other horses and not kick, strike, or bite (safety precaution). Clinicians reserve the right to remove a horse deemed as a “safety risk” from the clinic & no refund will be provided.

Cost:

\$40: The participant will provide their own horse.

\$55: The participant will be riding a team provided horse.

Horses must have a stall on site and \$25 of the fee will cover the stall fee.

All riders are required to have a current coggins.

30 day Health Certificates are required for all out of state horses.

Please send the registration form and payment to the Missouri Equine Council.

Make checks payable to the Missouri Equine Council.

See more Horse Show Information at www.mohorseshows.com

Show Me Thunder Drill Team



Clinic Registration Form

Rider's Name _____

Horse's Name _____

Home Address _____

City: _____ State: ____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Youth Rider: []
17 yrs of age or younger

Adult Rider: []
18 yrs of age or older

Emergency Contact: _____
Name Relation Contact Number

Please choose ONE option for participating in the clinic:

[] I will be bringing & using my own horse (\$40)

[] I will need to use a team provided horse (\$55)

Please include a check or money order with your registration form.

Please make checks out to: MEC

I understand by participating in this clinic that I cannot hold MEC, the Boone County Fairgrounds, or the Show Me Thunder Drill team OR anyone associated with these organizations or representing them liable for injury or death that may occur as participation in this clinic.

_____ Participant Signature

_____ Date