

Please have applications with payment into the OEF Office by Mon., Sept. 13<sup>th</sup>



## ENGLISH INSTRUCTION OF BEGINNER PROGRAM 2010 EVALUATION APPLICATION FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number: (R) \_\_\_\_\_ e-mail: \_\_\_\_\_

OEF Membership #: \_\_\_\_\_ EC Membership #: \_\_\_\_\_

Date: Saturday October 2<sup>nd</sup>, 2010

Location: Skyline Farm, Dunrobin, ON

**EVALUATION FEE (Flat) - \$183.75**

**OPTIONAL JUMPING MODULE FEE – additional \$52.50**

**MODULE RETAKE FEE - \$52.50 per module  
(to a maximum of \$183.75)**

\_\_\_\_\_ Lesson Plan & EAP \_\_\_\_\_ Mounted \_\_\_\_\_ Lunge \_\_\_\_\_ Stable Mgmt & Written \_\_\_\_\_ Unmounted

**There is a standard horse rental fee of \$52.50 charged for the use of host facility horses.  
Please include this fee payable to the Ontario Equestrian Federation at time of registration.**

I hereby indicate that I wish to enter the Instructor Program. I have read the list of prerequisites and requirements and agree to abide by the proposed outline, including the EC Code of Ethics & Code of Conduct. I also acknowledge that there is coaching insurance discounts available to me and that it is recommended that I take advantage of these benefits.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### **PARENT AGREEMENT** (if applicant is under age of eighteen)

I have read the outline for the Instructor Program and agree that my son/daughter may enter this Program. I am also aware that until such time as my child reaches the age of eighteen, that I am legally responsible for his/her actions. I am aware that there are coaching insurance discounts available to my child and it is recommended that he/she take advantage of these benefits.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please read the following carefully:**

I do hereby release the facility at which the evaluation I am participating is being conducted, the course conductor and the Ontario Equestrian Federation/Equine Canada from any liability for any injuries or damage to myself, horse, or property caused while participating in this coaching evaluation.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Don't forget to include proof of your:**

- 1) Current First Aid Certificate
- 2) NCCP Multi-Sport Module "A" Certificate of Completion with Equine Canada Learn to Teach Certificate **OR**
- 3) NCCP/Equine Canada 2-day Training Workshop Certificate of Completion
- 4) Mentor Program - Contract & Task Sheets **OR**
- 5) Signed Intent to decline training (theory/mentoring) form
- 6) Completed the EC Old English Learn to Ride Level II **OR** new Learn To Ride Level 6 **OR** Pony Club "C2" Standard certificate
- 7) 2010 EC Competitive Sport License minimum Silver
- 8) 2010 OEF Membership
- 9) Signed EC Coaches Code of Conduct and Code of Ethics
- 10) Signed Acceptance of Risk form
- 11) Completed Evaluation Application form with accompanying payment made payable to the Ontario Equestrian Federation

**METHOD OF PAYMENT**

Cheque     Money Order    Name on Card: \_\_\_\_\_  
 VISA         MasterCard    Card #: \_\_\_\_\_  
Expiry Date: \_\_\_\_\_ CSV #: \_\_\_\_\_  
Signature: \_\_\_\_\_

**CANCELLATIONS:**

Full registration refunds will be provided for written cancellations received prior to 30-days before the Assessment; a 25% administration fee will be applied to refunds requested after that date, however, **NO REFUNDS** will be granted less than 14-days prior to the date of the Assessment or for no-shows. The OEF reserves the right to cancel session(s) due to unforeseen circumstances or insufficient advance registration. The OEF cannot accept responsibility for expenses incurred as a result of the cancellation of an Assessment.

**Return completed application to:**

Ontario Equestrian Federation  
9120 Leslie Street, Suite 203,  
Richmond Hill, Ontario L4B 3J9  
Telephone: 905-709-6545 Toll-free 1-877-441-7112  
Fax: 905- 709-1867