



Steve Edwards
Mule and Donkey Training Clinic
Sept 3-4, 2011

**Benefitting the Dare to Dream Educational
Farm Program, Inc.**

Crimson Acres Equestrian Center,
16 Daniel Shays Hwy, Orange, MA
Contact: li1wing@verizon.net or 978-544-3785

REGISTRATION

Name: _____

Address: _____ Town _____ Zip _____

I will be bringing a Mule _____ Donkey _____ Age _____ Name _____

my e-mail address: _____ phone: _____

FEES: \$200 if paid by June 15, 2011. \$225 June 16-Aug 1. (No registrations after August 1.)

Clinic will be held Rain or Shine (there is an indoor arena)

Friday evening: potluck BBQ for participants and friends!

_____ I plan to camp on the grounds. (The site has room for some LQ trailers or RVs/tents, but does not have hookups.)

_____ I would like information on local accommodations. (there are 2 inexpensive, basic motels 1/2 mile from the farm, and a private campground within 10 miles.)

_____ I would like to reserve a stall (\$25 for the weekend) THIS MUST BE PAID WITH REGISTRATION.

I will be arriving on _____ (date) at approximately _____ (time)

PARTICIPANTS MUST SHOW CURRENT COGGINS UPON ARRIVAL and will be required to sign waiver of liability. Helmets required under 18; strongly advised for all.

Checks payable to: Dare to Dream;

mail to: L. Neely, attn: Mule/Donkey Clinic, 150 W Orange Rd, Orange, MA. 01364

I have enclosed a check for: _____