

Lessons with Thorsten Zarembowicz Clinics

Use this form for Lesson/Coaching Requests

You will need to print this form out, mailing it to the address given at the bottom of this form. If you do not have access to a printer, please contact David Gaston: spokesandspursky@gmail.com



First Name _____ Last Name _____
Street Address _____
City _____ State _____ Zip _____
Telephone Number (_____) _____ - _____ Email _____
Description of Equine and Carriage : _____

Fill in the following:

- 1: Indicate total amount of lessons requested next to the date
- 2: Please indicate the approximate time you wish to have the lesson(s)
- 3: Enter the amount you will be paying for the lessons. Each lesson is \$100 per 45 minutes. This is payable at the time of your lesson.

*There is no additional charge for Spokes and Spurs members. If you are not a Spokes and Spurs member, there is a one time only extra charge of \$30 for a single membership or \$35 for a family membership. Membership entitles you to all rights for all other Spokes and Spurs activities. You (and family members if submitting a family membership) are covered under our insurance program. You must fill out and submit a membership form at pay the fee at the time of your first lesson. For new Spokes and Spurs members, for your convenience, a membership form is at the end of this lesson request form.

Saturday, June 6, 2020	Number of Lessons Requested _____ Time(s) Requested _____ \$ _____
Sunday, June 7, 2020	Number of Lessons Requested _____ Time(s) Requested _____ \$ _____
Saturday, July 4, 2020	Number of Lessons Requested _____ Time(s) Requested _____ \$ _____
Sunday, July 5, 2020	Number of Lessons Requested _____ Time(s) Requested _____ \$ _____
Saturday, Aug. 1, 2020	Number of Lessons Requested _____ Time(s) Requested _____ \$ _____

Sunday, Aug. 2, 2020	Number of Lessons Requested _____	
	Time(s) Requested _____	\$ _____
Saturday, Sept. 5, 2020	Number of Lessons Requested _____	
	Time(s) Requested _____	\$ _____
Sunday, Sept. 6, 2020	Number of Lessons Requested _____	
	Time(s) Requested _____	\$ _____
Saturday, Oct. 3, 2020	Number of Lessons Requested _____	
	Time(s) Requested _____	\$ _____
Sunday, Oct. 4, 2020	Number of Lessons Requested _____	
	Time(s) Requested _____	\$ _____
Saturday, Nov. 7, 2020	Number of Lessons Requested _____	
	Time(s) Requested _____	\$ _____
Sunday, Nov. 8, 2020	Number of Lessons Requested _____	
	Time(s) Requested _____	\$ _____

Total Amount Owed with this Request \$ _____

Please mail this form to:
 Thorsten Zarembowicz Clinics
 P.O. Box 820
 Paris, KY 40362

Lesson payment is due on the day of lesson. Please be aware that if you cancel your lesson with less than 24 hours notice, we will expect payment for the lesson.

OPTIONAL INFORMATION: I would like to concentrate on the following areas during my lesson(s):!



2020 SPOKES AND SPURS, INC MEMBERSHIP FORM

Complete and Submit with your payment at the time of your first lesson or mail this in advance of your lesson date with your check payable to "Spokes and Spurs" to:

Hugh Bellis-Jones, Treasurer

1145 Hill Rd.

Paris, KY 40361

Circle One: Family Membership \$35

Single Membership \$30

Name _____ Farm Name _____

Address _____ Email _____

City, State, Zip _____

Phone # _____ ADS member ___ CAA member ___ USEF member ___

Family members names under family membership _____

Driving Interests (circle all that apply): Recreational Pleasure Combined Driving
Carriage restoration/collection

Other _____

Equines _____

Carriages _____

I would like to host a (circle any that apply): drive play day competition social event

Preferred method of contact? (circle one) E-mail, Facebook, U.S. Mail, phone, text

THIS PORTION OF THE FORM MUST BE COMPLETED!

SPOKES & SPURS, INC. DISCLAIMER

To be signed by every member or family representative. I understand that neither Spokes & Spurs, Inc. ("S&S") nor its officers accept any responsibility for accidents, damage, injury or illness to the horses, owners, riders, drivers, grooms, passengers, attendants, spectators, or any other person or property in connection with any activities. I hereby expressly agree for myself and my principals, representatives, employees and agents: to be bound by the rules of the activities; and to accept as final any decision of the officials or officers on any question arising under the local rules of the Competition, and agree to hold S&S, their officers, directors, employees and agents, judges, officials and organizing committees, harmless for any action taken. I am fully aware that horse sports, including driving, and activities involve inherent dangerous risk of serious injury or death and by participating I do so voluntarily and expressly assume any and all risks of injury or loss, and I agree to indemnify and hold S&S, their officers, directors, employees and agents, officials, and organizing committees, harmless from and against all claims including any injury or loss suffered! during or in conjunction with the club or activities, whether or not such claim, injury or! loss resulted, either directly or indirectly, from the negligent acts or omissions of S&S, their officers, directors, employees and agents, officials and organizing committees.

MEMBER OR FAMILY REPRESENTATIVE SIGNATURE (Parent or Guardian if under 21 years)

Date of Signature: _____, 20_____