



Peter Gray Eventing Clinic

April 28 and 29, 2018

The Event at Archer

3967 Archer Parkway, Cheyenne WY 82009



Entries close April 10, 2018.

No refunds after closing date unless the spot can be filled from a wait list. \$25 late fee for entries sent after closing date.

ONLY PAYMENT IN FULL WILL BE CONSIDERED AN ENTRY.

Please send separate entries for multiple horses.

Please use the included USEA Release Form for Educational Activities, and Archer waiver.

Lessons are 1.5 hours with groups of 4 or 2 hours with groups of 6 depending on entries and levels filled

Clinic Format: First Day is Flat and Gymnastics 2nd day XC (or SJ course work weather depending)

\$150/horse for one day

\$275/two days

Add: \$10/lunch EACH day

Intro /Beginner Novice

Novice

Training

Prelim

Stabling available \$25.00/night.

Anditting: Free

Coffee, tea, and other refreshments will be provided. Lunch is not provided, however with additional \$10/day we will order sandwiches, chips for everyone. The intention is to host the full clinic at Archer, however we will have an inclement weather plan and indoor on standby. **Please dress accordingly.**

If you are interested in dinner at the Murphy's Saturday Evening during the clinic with Peter Gray please note below.

I Have Included the Following Payments (check all that apply):

Clinic Fee for one day \$150

Clinic Fee for two days \$275

Late Fee: \$25

Lunch for 1 day (\$10.00) _____ Lunch for 2 days (\$20.00) _____

Interested in Dinner at Murphy's Saturday night with the Clinician? YES or No

Check Payable to The Event At Archer

Name of Rider: _____ Name of Horse: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Please send this slip & the USEA RELEASE FORM, ARCHER WAIVER, & FULL PAYMENT to:

Allison Murphy 2139 Iron Mountain Road Cheyenne WY 82009 Mobile: 307-640-9222

Email: Riding2horses@gmail.com OR Allison@cheyennehomes.com

PROFILE- PETER SCOTT GRAY

PETER HAS BEEN A RESIDENT OF ONTARIO, CANADA SINCE COMPLETING STUDIES AT THE UNIVERSITY OF GUELPH, MAJORING IN ANIMAL SCIENCE. HE HAS ESTABLISHED HIS OWN TRAINING CENTRES AT "STONEHILL FARM", FORMER SITE OF THE PRESTIGIOUS STONEHILL FARM HORSE TRIALS, AND IN OCALA FLORIDA AT "WENTWORTH FARM", OFFERING YEAR ROUND TRAINING FOR HORSES AND RIDERS.

HIS TRAINING IS DIVERSE AND PETER HAS A SPECIAL INTEREST IN PRODUCING YOUNG HORSES IN A VARIETY OF DISCIPLINES DEPENDING ON WHERE THEIR TALENTS LIE. THIS HAS MADE HIM A POPULAR CLINICIAN THROUGHOUT NORTH AMERICA PREPARING STUDENTS FOR DRESSAGE, EQUITATION, JUMPERS AND EVENTING.

AS A COMPETITOR, PETER HAS COMPETED AT MOST MAJOR INTERNATIONAL EVENTS IN EUROPE AND NORTH AMERICA INCLUDING ROLEX KENTUCKY, BADMINTON, BURGHLEY, LUHMULEN, SAUMUR, BOEKOLO, LE LION D'ANGERS AND PUNCHESTOWN. PETER HAS COMPETED IN THREE OLYMPIC GAMES (ALTERNATE FOR THE CANADIAN TEAM ATHENS OLYMPICS 2004) 2 WORLD CHAMPIONSHIPS AND IS A PAN AM EVENTING INDIVIDUAL BRONZE MEDALIST. IN ADDITION TO HIS EVENTING, PETER HAS CAMPAIGNED THREE F.E.I. DRESSAGE HORSES OVER THE PAST SIX YEARS ENABLING HIM TO DEBUT IN HIS FIRST GRAND PRIX COMPETITION.

PETER IS ONE OF ONLY 2 EQUESTRIAN CANADA CERTIFIED LEVEL 4 COACHES AND IS A KEEN EDUCATOR OF ASPIRING COACHES. HE HAS TWICE BEEN A CANADIAN PROVINCIAL YOUNG RIDER COACH, NATIONAL OLYMPIC EVENTING COACH FOR CANADA FROM 1996-2000, THE PAN AM COACH FOR VENEZUELA IN 2011 AND

GUATEMALA 2015. PETER HAS RECENTLY SIGNED ON TO COACH THE COLOMBIAN EVENTING TEAM UNTIL THE TOKYO OLYMPIC GAMES 2020.

PETER IS ALSO ACTIVELY INVOLVED IN THE CERTIFICATION AND EDUCATION OF COACHES IN CANADA AND THE U.S. AND WHILE ON THE EQUESTRIAN CANADA COACHING COMMITTEE, ORGANIZED THREE NATIONAL COACHING SYMPOSIUMS PRESENTING NOTABLE CLINICIANS SUCH AS GEORGE MORRIS, DAVID OCONNOR, INGRID KLIMKE, LESLIE LAW AND JEFFREY TEALE. AFTER 15 YEARS OF ORGANIZING THE WELL KNOWN STONEHILL HORSE TRIALS, PETER CO-FOUNDED "EQUIVENTURES", AN EVENT MANAGEMENT COMPANY IN THE U.S. WHICH RAN 16 NATIONAL HORSE TRIALS AND 5 F.E.I. COMPETITIONS UP TO THE C.C.I. 2* LEVEL FROM 2009-2015.

PETER HAS RECENTLY EMBARKED ON HIS EDUCATION TO BE AN EVENTING OFFICIAL AND HAS BEEN AWARDED HIS EC LEVEL 2 JUDGES CARD, USEF "R" EVENTING JUDGE AND FEI 1/2* EVENTING JUDGE.

HIS ALLROUND EXPERIENCE AS A COMPETITOR, COACH, CLINICIAN, OFFICIAL, HAS SEATED HIM ON MANY COMMITTEES INCLUDING THE F.E.I. EVENTING COMMITTEE, EC HIGH PERFORMANCE, EC COACHING, F.E.I. SAFETY OFFICER FOR CANADA, FORMER CHAIR OF THE C.E.T SELECTION COMMITTEE FOR EVENTING, THE UNITED STATES EVENTING ASSOCIATION PROFESSIONAL RIDERS COUNCIL. PETER CURRENTLY SITS ON THE USEA BOARD OF GOVERNORS AND SINCE 2013 HAS BEEN THE CHAIR OF CANADIAN EVENTING.



REQUEST TO PARTICIPATE AND RELEASE
2018



I hereby request permission to participate in recreational activities including Horse Trials, Clinics and Schooling shows and other equine activities (Activity). I understand that participation in recreational activities including horse trials, clinics and schooling shows and other equine activities (activity) is an inherently dangerous activity. Risks include, but are not limited to, property damage or destruction, serious physical injury or death.

In exchange for the opportunity to participate in recreational activities including horse trials, clinics and schooling shows and other equine activities (activity), I do hereby, for myself, my heirs, personal representatives and assigns release and discharge Windy Wyoming MSEA, Inc. (Vendor) The Event at Archer (Vendor) it volunteers, sponsors, event vendors, employees, owners, United States Eventing Association, United States Equestrian Federation, and agents, and Laramie County, its elected and appointed officials, their employees volunteers, and agents from all actions, causes of action, damages, claims or demands for all known or unknown personal injuries, property damage or death resulting from or arising out of my participation in the above described activity or events. Laramie County does not waive its Governmental/Sovereign Immunity, as provided by any applicable law including W.S. 1-39-101 et seq., and fully retains all immunities and defenses provided by law for any action, whether in tort, contract or any other theory of law.

By my signature below, I certify and warrant that I have read and fully understand the foregoing statements and Release and that I have read and agree to abide by any and all rules and instruction from Windy Wyoming MSEA and The Event at Archer governing participation in recreational activities including horse trials, clinics, schooling shows and other equine activities.

I am signing this REQUEST TO PARTICIPATE AND RELEASE, voluntarily and without coercion and in consideration of the permission to participate and/or any other consideration provided to me in connection with the activities and or events described herein. I further certify that I am 18 years of age or older. If I am a minor, my parent or guardian, by signature below, fully participates in and acknowledges the contents and effect of this waiver and release on my behalf.

Participant

Date

Printed Name

Parent/Guardian

Date

Printed Name



USEA EDUCATIONAL ACTIVITIES AND SCHOOLING SHOWS RELEASE FORM

NAME OF ACTIVITY/SCHOOLING SHOW: Peter Grey Clinic - The Event at Archer **USEA AREA:** IX
DATE(S) HELD: April 28-29, 2018 **LOCATION:** 3967 Archer Parkway, Cheyenne **STATE:** Wyoming

I have applied to participate in this USEA sponsored educational activity. I agree that my participation is subject to the Conditions in this release and to those set by the organizer of this activity, the regulations and requirements of the USEA and, where applicable, the **U.S. Equestrian Federation Rules for Eventing**.

I agree to wear protective headgear when riding. When jumping, I agree to wear protective headgear passing or surpassing the ASTM/SEI standards with harness attached that meets standards currently imposed by the **U.S. Equestrian Rules for Eventing**. I understand that the USEA mandates that all riders participating in cross-country activity wear body-protecting vests that meet or exceed current USEF rules and the wearing of an approved medical armband or bracelet.

I understand that the sport of eventing is a high risk sport, and that my participation in this educational activity may also involve participation in an "equine activity" as defined by applicable laws and is solely at my own risk. I understand that my participation involves all inherent risks associated with the dangers and conditions which are an integral part of equine activities, including, but not limited to, the propensity of equines to behave in ways which may result in injury, harm or even death to humans or other animals around or near them; the unpredictability of equine reaction to sounds, sudden movements, smells and unfamiliar objects; persons or other animals; hazards related to surface and subsurface conditions; collisions with other equines or objects; and, the potential of a participant to act in a negligent or unskilled manner which may contribute to injury to the participant or others, including falling or inability to maintain control over the animal. By participating in this activity **I agree** to assume responsibility for those risks, and **I release** and agree to hold harmless the activity organizer, organizing committee, officials, the USEA, USEF, their officers, agents, employees and the volunteers assisting in the conduct of this USEA educational activity and the owners of any property on which it is to be held, from all liability for negligence resulting in accidents, damage, injury or illness to myself and to my property, including the horse(s) which I may ride.

I understand and agree that the organizer of this USEA educational activity has the right to cancel this activity; to refuse any entry or application; to require and enforce the wearing of safety or other attire and the conduct of riders, horses and visitors; and to prohibit, stop or control any action during the activity deemed by the organizer to be improper or unsafe.

THIS FORM MUST BE FILLED OUT COMPLETELY AND SIGNED IF YOU WISH TO PARTICIPATE IN THIS ACTIVITY.

PARTICIPANT'S NAME (Please Print): _____
ADDRESS: _____
CITY: _____ **STATE:** _____ **ZIP:** _____
PHONE: _____ **CELL PHONE:** _____ **EMERGENCY CONTACT PHONE:** _____
FAX: _____ **EMAIL:** _____
TRAINER'S NAME (AT THIS EVENT): _____ **PHONE:** _____

NUMBER OF HORSES I WILL BE RIDING DURING ACTIVITY (if applicable): _____

Current Riding Level (if applicable):
 Beginner Novice Novice Training Preliminary Intermediate Advanced

Check appropriate box:
 I am a USEA member and my number is #: _____
 I am not a USEA member
 I am not a USEA member. I wish to join and have enclosed my membership form and dues.

Check here if participant is under 18 years old.

SIGNATURE: _____ **Date:** _____

(If participant is under 18, Release must be signed by parent or legal guardian, not by trainer or instructor. This release form is valid only when signed personally by the participant. Signatures of all others, with the exception of a parent or legal guardian of a minor, will not be accepted in the event a claim is filed.)