

**Clinton  Anderson**

**HORSEMANSHIP CLINIC**

**INSTRUCTION**

**INNOVATION**

**INSPIRATION**

**INSTRUCTION**

# Table of Contents

<b>Application</b> .....	Pg. 3
<b>Requirements &amp; Checklist</b> .....	Pg. 8
<b>Medical History &amp; Emergency Contact</b> .....	Pg. 11
<b>Waiver &amp; Release of Liability</b> .....	Pg. 12
<b>Helmet Statement</b> .....	Pg. 15
<b>Photo Release</b> .....	Pg. 16
<b>General Information</b> .....	Pg. 17
<b>Ranch Directions</b> .....	Pg. 18
<b>Ranch Map</b> .....	Pg. 19
<b>Around Stephenville</b> .....	Pg. 20
<b>Success Tips</b> .....	Pg. 21

Clinton Anderson

***\*Please E-Mail, Mail or Fax in each Fully Completed page (21 total) of this clinic document. Fax# 254-965-5432***



# 2017 Ranch Clinic Application

Corporate Office • 13635 FM 3025 • Stephenville, TX 76401  
Downunderhorsemanship.com • 888-287-7432 • Fax: 254-965-5432

OFFICIAL USE ONLY	NWC Verified: _____	
Date	Receipt#	Type of Charge

**APPLICANT INFORMATION:** *Complete a separate form for each applicant. Limited to 1 horse per clinic.*

Name \_\_\_\_\_ First \_\_\_\_\_ Last \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Country \_\_\_\_\_ Sex: \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_  Female

Cell Phone \_\_\_\_\_ Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  Male  
*(Applicants must be 18 years of age at start of clinic)*

E-Mail \_\_\_\_\_

I am a No Worries Club Member:  Yes  No

**Clinic I am Interested in Attending: 50% of Fees are due at Sign up.**

Dates:	Course:	Instructor:	Attending:	Price: Regular / NWC	Notes:
Mar 31 - Apr 1	10 Day Fundamentals	Clinton Anderson	<input type="checkbox"/>	\$3,000 / \$1,500	
Jun 27 - Jul 7	10 Day Colt Starting	Clinton Anderson	<input type="checkbox"/>	\$3,000 / \$1,500	Must submit a video that shows walking, trotting and cantering on a broke horse with an independent, secure seat
Nov 3-5	3 Day Training on the Trail	Clinton Anderson	<input type="checkbox"/>	\$2,000 / \$1,000	Must submit a video of Fundamental exercises for approval into clinic
Nov 10-20	10 Day Intermediate	Certified Clinician	<input type="checkbox"/>	\$2,500 / \$1,250	Must submit a video of Fundamental exercises for approval into clinic
DUH Lease Horse? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: \$250/day X number of days = \$					
RV Site? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: <input type="checkbox"/> 30amp <input type="checkbox"/> 50amp			Subtotal = \$		
	RV Site - 3 Day = \$90		RV Site = \$		
	RV Site - 10 Day = \$300		Total = \$		

Payment you are including:  Deposit ONLY  
 PAID IN FULL

**PAYMENT METHOD:** **HORSE INFORMATION:**

Check Check No. \_\_\_\_\_

Visa  Master Card  American Express  Discover

Cardholder Name \_\_\_\_\_

Card No. \_\_\_\_\_

Exp. Date: \_\_\_\_\_ / \_\_\_\_\_ CVV Code: \_\_\_\_\_

Signature \_\_\_\_\_

*\*No Stallions, Mules, or Donkeys Permitted*

Name \_\_\_\_\_

Age \_\_\_\_\_

Sex \_\_\_\_\_

Breed \_\_\_\_\_

*\* Current Negative Coggins & Valid Health Certificate Required*

**IMPORTANT:**

**All 10-day clinics will have a day off on the 6th day. You'll work 5 full days, receive a day of rest and then work another 5 full days.**



# 2017 Ranch Clinic Application

Corporate Office • 13635 FM 3025 • Stephenville, TX 76401  
Downunderhorsemanship.com • 888-287-7432 • Fax: 254-965-5432

## POLICIES:

**Personal Photos:** Photos are meant to be for your personal use only, not for commercial purposes or public viewing. You are not authorized to publish or display any photos taken of Clinton, Mindy, Diez, the staff, anyone else or anything at the Downunder Horsemanship Ranch without written permission from Downunder Horsemanship and the person (or people) in the photo.

### **ABSOLUTELY NO VIDEO CAMERAS.**

**Other Policies:** No dogs permitted. No Stallions, Mules or Donkeys allowed. Appropriate footwear is required at all times during your clinic. Applicants must be a minimum of 18 years of age.

**Payment Policy:** An approved, completed application with deposit representing 50% of the clinic fees will successfully endorse the participant and reserve their clinic spot. Payment in full will be due no later than 60 days prior to the clinic start date in order to guarantee participant's spot.

**Cancellation Policy:** Downunder Horsemanship reserves the right to cancel a course due to unforeseen circumstances beyond our control. Such decisions will be made at least two weeks before the scheduled course date. If a course is cancelled by Downunder Horsemanship, you will be entitled to a full refund or the option to transfer to another date.

### **Transfer Fee:**

A fee will be charged for any transfer(s). Transfers to the same year will be allowed if your clinic spot can be filled. If your clinic spot cannot be filled there is no transfer or refund awarded. There are no transfers outside of clinic year. Transfer prior to 60 days: \$250 fee. Transfer 30-60 days before clinic: \$500 fee. Transfer less than 30 days before clinic: \$750 fee.

**Refund Policy:**

- Cancellation 120 days before the clinic: 50% deposit refunded.
- Cancellation 120-60 days before clinic: 25% deposit refunded.
- Cancellation 60 days or fewer before clinic: No refund.

**Spectators:** There will be no spectators allowed at any of the Ranch clinics in Stephenville, TX in 2017.

**Helper Policy:** Each clinic participant is permitted to have one helper accompany them throughout the duration of the clinic. Your helper has to be at least 18 years of age, and should be someone who is supportive of your horsemanship needs. They'll act as your personal assistant throughout the clinic helping you groom and tack your horse up, bring you water and offer their support. Choosing a helper you do not know personally and doesn't assist you will only hurt your clinic experience. Please do not abuse this support system.

The same horse and rider combination who sign up for the clinic is the only horse and rider team to participate throughout the duration of the clinic. If you decide to not participate in the clinic, or are unable to complete the clinic, no one else can participate in the clinic with your horse. This rule is in place to ensure that all clinic participants receive the best instruction possible. Those who enter the clinic late will not know all of the same information everyone else in the class has received up to that point.

Your helper may not groundwork or ride your horse at any time during your time on the ranch.

**DUH Lease Horses:** For every clinic we have a limited number of horses available for participants to lease at an additional cost of \$250/day. Participants who lease one of our horses will be expected to care for their leased horse during the clinic. However, we will provide the feed, veterinary, and farrier care for all of our leased horses. The majority of participants who choose to lease a horse for a clinic do so because they reside outside the U.S., and it is simply not practical for them to bring one from home.

**I agree to the above policies by initialing here:** \_\_\_\_\_

**Approval Policy:** Acceptance is subject to application review and approval. A full refund will be given if application cannot be accepted. Application, Form and Qualifications Checklist must accompany booking.

**By signing here I acknowledge and agree to the above policies. I have viewed the video clip of Clinton outlining clinic policies and guidelines (This clip is located on the No Worries website next to the clinic application and on the Downunder Horsemanship website Clinic Page).**

**Signature** \_\_\_\_\_

**Date:** \_\_\_\_\_

Please read over the list of exercises and make sure you are able to perform each exercise for the clinic level you're attending with the horse that you plan to participate with. When deciding which clinic (Fundamentals, Intermediate, or Colt Starting) you should attend, be honest with yourself and assess your ability and your horse's ability. Clinics are meant as a way for Clinton to critique your understanding and execution of the Method at a particular level. The best way to ensure that you get the most help and the best instruction for your money is to participate at a level you and your horse are proficient at. Last but not least, please keep in mind Clinton and all of the Downunder Horsemanship Staff consider having a sense of humor as a key ingredient of the company's culture. In saying this Clinton nor his staff will ever purposefully go out of their way to offend anyone, however, if you're easily offended by off-color language, practice "political correctness", are hyper-sensitive, or are a classic "tree-hugger" in all likelihood you won't enjoy the clinic. If, at any point during the clinic you're unhappy to the point of wanting to leave Clinton will happily refund your money for the unused remaining portion of the clinic. Remember in the end it's your choice to be there or not. If however, you're pretty thick-skinned, not easily alarmed or offended by occasional coarse language, are definitely not a classic "tree-hugger", and don't practice "political correctness" in any shape manner or form you'll have an awesome experience!

For example, if you've taught your horse the Fundamentals exercises and are currently working at the Intermediate level, you should plan to participate in a Fundamentals Level Clinic. If you have successfully completed the Fundamentals and Intermediate exercises with your horse and are working on Advanced exercises, plan to attend an Intermediate Level Clinic. Once you and your horse are proficient at all three levels of the Method, then you'll be eligible to attend an Advanced Level Clinic. In fact, Clinton recommends that you attend several clinics at each level before progressing to the next.

The better understanding you have of the basics of horsemanship, the better prepared you and your horse will be to excel in the higher levels. Please also keep in mind that there are 29 other participants in the clinic and Clinton has to divide his time evenly among everyone. If you inadequately evaluate your ability or your horse's ability, you'll take away from other participants' clinic experience and not receive the help you need.

## FUNDAMENTALS CLINIC: EXERCISES

### Fundamentals Groundwork

1. Roundpenning Exercises
2. Desensitizing to the Lead rope
3. Desensitizing to the Stick and String – all 3 sides
4. Yield the Hindquarters
  - a. Stage 1
  - b. Stage 2
5. Backing Up
  - a. Method 1
  - b. Method 2
  - c. Method 3
  - d. Method 4
6. Yield the Forequarters
7. Lunging for Respect Stage 1
8. Flexing
  - a. Steady Pressure
  - b. Bumping on the Halter
  - c. Poke and Flex
  - d. Flex from Opposite Side
9. Sending Exercise
10. Circle Driving
11. Lunging for Respect Stage 2
12. Leading Beside
13. Fundamental Desensitizing
  - a. Slap and Walk
  - b. Headshy Exercises
  - c. Helicopter Exercise

### Fundamentals Riding

1. Flexing with Bridle on the Ground
2. Flexing at a Standstill (under saddle)
3. One Rein Stops
4. Cruising Lesson
5. Follow the Fence
6. Diagonals
7. Touch and Rub Exercise (on the ground)
8. Yield the Hindquarters at a Standstill
9. Yield to a Stop
10. Bending at the Walk
11. Bending Transitions
12. Vertical Flexion at a Standstill
13. Draw to a Stop
14. Yield the Hindquarters and Back Up



# 2017 Ranch Clinic Application

Corporate Office • 13635 FM 3025 • Stephenville, TX 76401  
Downunderhorsemanship.com • 888-287-7432 • Fax: 254-965-5432

**COLT STARTING CLINIC: VIDEO DUE DATE: MARCH 26, 2017**

If you've ever dreamed of starting a colt with Clinton Anderson by your side, this summer, you'll get your chance to receive world-class instruction straight from the man himself. He'll help participants take their unstarted young horses from never having been saddled to riding out on the trail and over a challenging obstacle course in 10 days.

## **Rider Requirements:**

Riders must be able to walk, trot and canter confidently with an independent seat and must demonstrate their ability to do so in a video application. There are no restrictions on the horse used for the video application – i.e. you can use your old broke gelding. Besides being confident at all three gaits, participants must be physically fit to train their colt 10 days straight, for 8 plus hours a day, under the Texas sun. If you are not fit and athletic enough to mount a saddled horse without the use of a mounting block we ask that you not enroll in the Colt Starting Clinic. Colts starting is extremely fun, safe, and rewarding when done correctly. However, it can also be very dangerous for anyone not physical fit and athletic. The safety of our participants is our foremost concern. That's why we have this rule in place. It's not to offend anyone, but rather to keep everyone safe. Please keep that in mind.

## **Colt Requirements:**

Colts brought to the clinic must be 2 years old or older and be halter broke – meaning they can be lead in and out of the trailer and to the roundpen. Preferably, the colts should not have been saddled or ridden.

\*\*To qualify to participate in the Colt Starting Clinic you must submit a DVD, your video stored on a USB device, or digital video from sites like YouTube™ or Vimeo™ with a valid link (No VHS, Mini DV or Mini 8 tapes) of you demonstrating your ability to ride at the walk, trot, and canter with a balanced independent seat. The video requirements include both a posting trot as well as mounting the horse from the ground. Video submissions will become the property of Downunder Horsemanship and the storage devices will not be returned. If we are training your horse for you, no video is required.

Video applications should be sent to the Downunder Horsemanship office attention "Clinics" or emailed to [brittney@downunderhorsemanship.com](mailto:brittney@downunderhorsemanship.com). Applications are being accepted now. All video submissions must be received no later than March 26, 2017.

## TRAINING ON THE TRAIL CLINIC

This clinic is intended for horsemen who have mastered the Fundamentals level of the Method and are ready to apply the skills they've learned to riding outside of the arena. The clinic will focus on exercises covered in the Fundamentals In Action on the Trail Series, which includes foundation trail exercises designed to get the same level of control and softness from your horse on the trail as you have in the arena, obstacle training, and problem-solving exercises. For an overview of what is likely to be covered during the clinic, visit [www.clintononthetrail.com](http://www.clintononthetrail.com).

The **Training on the Trail Clinic** requires a video demonstrating that you and the horse you will be bringing to the clinic are proficient at each of the exercises in the Fundamentals level of the Method, both groundwork and riding. You must submit this video along with this completed clinic application. You **MUST** show each one of the Fundamentals exercises in order to be considered. Your deposit payment will be due if you are notified of acceptance based on this video.

\*\*To qualify to participate in the Training on the Trail clinic you must submit a DVD, your video stored on a USB device, or digital video from sites like YouTube™ or Vimeo™ with a valid link (No VHS, Mini DV or Mini 8 tapes) of you and your clinic horse demonstrating your ability to perform all exercises included in the Fundamentals Level. Video submissions will become the property of Downunder Horsemanship and the storage devices will not be returned.

Video applications should be sent to the Downunder Horsemanship office attention "clinics" or emailed to [brittney@downunderhorsemanship.com](mailto:brittney@downunderhorsemanship.com). Applications are being accepted now.

## LESSONS MAY INCLUDE:

### TRAINING YOUR TRAIL HORSE

- Groundwork Preparation
- One Rein Stops
- Yield to a Stop
- Controlled Cruising
- Bending Transitions
- Tree-to-Tree
- Tree-to-Tree With a 3/4 Turn
- Confused Loping
- Serpentine Around Trees
- Figure 8 Around Trees
- Draw to a Stop
- Draw to a Stop and Back Up
- Bending Rollbacks
- Desensitizing Your Horse: Objects That Move
- Desensitizing Your Horse: Stationary Objects

### INTRODUCTION TO OBSTACLES

- Logs
- Bridges
- Cowboy Curtain
- Open and Close a Gate
- Boulders
- Narrow Passages
- Gullies
- Narrow Gullies
- Hills
- Water
- Mud

### RIDING SAFELY IN A GROUP

- Leap Horse
- Cloverleaf Mayhem

### PROBLEM SOLVING

- Jigging
- Buddy Sour
- Barn Sour
- Head Tossing
- Spooking
- Bolting
- Won't Go Forward
- Hot and Busy-Minded
- Rearing
- Tripping
- Grass Snatching
- Running Your Legs Into Trees
- Lying Down on the Trail
- Fresh Horses
- Riding Safely in Traffic



## INTERMEDIATE CLINIC

The **Intermediate Clinic** requires a video demonstrating that you and the horse you will be bringing to the clinic are proficient at each of the exercises in the Fundamentals level of the Method, both groundwork and riding. You must submit this video along with this completed clinic application. You **MUST** show each one of the Fundamentals exercises in order to be considered. Your deposit payment will be due if you are notified of acceptance based on this video.

**\*\*To qualify to participate in the Intermediate and Advanced clinics you must submit a DVD, your video stored on a USB device, or digital video from sites like YouTube™ or Vimeo™ with a valid link (No VHS, Mini DV or Mini 8 tapes) of you and your clinic horse demonstrating your ability to perform all exercises included in the Fundamentals Level for the Intermediate clinic and the Intermediate Level for the Advanced Clinic. Video submissions will become the property of Downunder Horsemanship and the storage devices will not be returned.**

Video applications should be sent to the Downunder Horsemanship office attention "clinics" or emailed to [brittney@downunderhorsemanship.com](mailto:brittney@downunderhorsemanship.com). Applications are being accepted now.

I understand Clinton Anderson will not teach any of this clinic. This Clinic will be taught by a Certified Clinician.

### INTERMEDIATE GROUNDWORK

1. Changing Sides
  - a. With your hand
  - b. With the lead rope
2. Run Up and Rub
3. Desensitizing to Plastic Bags
4. Slap and Tap
5. Changing Eyes
  - a. Stage One
  - b. Stage Two
6. Touch and Rub
  - a. Nose
  - b. Poll
  - c. Forequarters
7. Outback Exercise
8. C-Pattern
9. Throw to a Stop
10. Sidepassing on the Fence
11. Leading Behind
12. Turn and Go
  - a. Turn and Draw
  - b. Turn and Drive Out
13. Circle Driving Transitions
14. Line Driving
15. Circle Driving Transitions on the Long Line
16. Bridle Bending
  - a. Forward and Around
  - b. Yield the Hindquarters
  - c. Yield the Shoulder
  - d. Back Up

### INTERMEDIATE RIDING

1. Vertical Flexion at the Walk
2. Cloverleaf Exercise
3. Yield and Bend
4. Post N' Circle
5. Yield the Hindquarters on the Fence
6. Yield the Hindquarters and Sidepass on the Fence
7. Rollbacks on the Fence Stage One
8. Vertical Flexion at the Trot
9. Shoulder In/Shoulder Out
10. Serpentine Exercise
11. Yield the Hindquarters and Bring the Front End Through
12. Down and Around
13. Bending with Vertical
14. Leads Exercise
15. Sidepass from a Standstill on the Fence
16. Stop on Whoa
17. Draw to a Walk Transitions

NOTE: Please be aware the first several days of the Intermediate Clinic you will spend a majority of your time refining the Fundamentals exercises to prepare for the Intermediate Level instruction. Spending this initial period on refinement of the Fundamentals is critical to insure your success in achieving our goal of working through all of the Intermediate exercises during the ten days. Even small gaps or "holes" in you or your horse's understanding and performance with the Fundamentals will make teaching the Intermediate Level extremely frustrating and/or impossible for both you and your horse. As Clinton says again and again: preparation is the key to success.



## Requirements and Checklist

The Fundamentals, Intermediate and Advanced Clinics will cover the exercises featured on Clinton Anderson's **Fundamentals training DVD's, Intermediate training DVD's and Advanced training DVD's**. You must be able to answer yes to all of the questions below before you can sign up for the Fundamentals, Intermediate or Advanced Clinic.  
*Important Note: If you do not meet the clinic requirements, you will be asked to leave the clinic without refund.*

- I understand that Clinton Anderson will personally teach no less than 50% of the Clinton Anderson clinics. The remaining time will be taught by a Certified Clinician.**
- Clinton's character and personality are the driving force of Downunder Horsemanship and key to his success as a clinician. During the course of the clinic, you will experience Clinton's full character. He has an incredible amount of knowledge to share and will help you achieve great results with your horsemanship. He's entertaining. He swears. He tells racy jokes. He's politically incorrect. And he doesn't apologize for who he is nor will his team apologize for him. Clinton is Clinton.  
I am fully aware that Clinton has a unique personality and sense of humor. I am aware that Clinton's instructional sessions will include profanity and statements that are not PG-13 nor politically correct.
- We recommend all horses participating in clinics to be shod due to the amount of time riding and different types of terrain.

### My Personal Details:

- I am at least 18 years old.**
- I understand that this is a physically demanding clinic. I am healthy and able to participate in the clinic.**
- I will be responsible for the health, care, cleaning stalls and feeding of my horse throughout the entire clinic.**

*A Clinton Anderson clinic is a physically demanding experience that will require you to be outside on your feet 8-plus hours a day doing strenuous activity such as walking and running across the arena, rotating your arms in hundreds of circles, crouching forward, maintaining your balance in the saddle, etc. It's a full day of work followed by taking care of your horse (grooming, saddling, unsaddling, feeding, cleaning his stall, etc.). If you have a bad back, weak knees or any sort of medical condition that will prevent you from keeping up with the demands of the clinic, it would be best to schedule a private lesson with a Clinton Anderson Professional or Certified Clinician who can cater to your needs.*

### My Horse's Ability:

- I am confident riding my horse on a loose rein at the walk, trot and canter in a large group setting.**  
You must be confident riding the horse you plan to bring to the clinic on a loose rein at the walk, trot and canter in the last 30 days. If you cannot walk, trot and canter the horse you're bringing to the clinic on a loose rein without grabbing a hold of the saddle horn, gripping the horse's sides tightly with your legs or grabbing a hold of the reins, you are not ready to participate in a Clinton Anderson Clinic. These clinics are not designed for the beginner rider learning how to develop balance and a secure seat. You must have a good independent seat at the walk, trot and canter. An independent seat means that you don't need the reins or your legs to stay in the saddle. The best way to develop an independent seat and gain confidence in riding on a loose rein is experience. The more horses you ride and the more time you spend in the saddle, the better your seat will get. If you're not able to walk, trot and canter on a loose rein, then Clinton highly recommends contacting his Professional or Certified Clinicians to schedule a private lesson. The Clinicians will be able help you develop your seat and build your confidence.
- I am confident cantering my horse on a loose rein in a group setting with 30 other horses.**  
Not only must you be able to walk, trot and canter the horse you're bringing to the clinic on a loose rein, but you must also be confident cantering in a group setting with 30 other horses on a loose rein. If you or your horse gets nervous or upset if a person rides near you, you're not ready for a Clinton Anderson Horsemanship Clinic. Before deciding to participate in a clinic, test yourself to see if you and your horse are able to walk, trot and canter on a loose rein in a group situation.  
**Important Note:** *If you cannot confidently canter your horse on a loose rein in a group environment, you will be asked to sit out the entire riding portion of the clinic. No refunds will be given.*

Below are several responses we've heard in the past from unsuccessful clinic participants:

- *I cantered my horse 3 years ago.*
- *I cantered when I was a kid, but I haven't cantered since.*
- *I cantered my friend's horse, but never cantered my own horse.*
- *My trainer can canter my horse, but I'm afraid to.*
- *I cantered my horse two months ago, but he bucked me off and now I'm afraid to canter.*
- *I'm OK cantering as long as I'm not riding with a group of people.*

**None of these responses are acceptable.**

## Requirements and Checklist

### My Horse's Ability:

- I am participating with a horse, not a donkey or a mule.
- My horse is a mare or gelding.
- My horse is not a stallion.
- My horse that I am participating on has had at least 60 rides.

This is to ensure that your horse is prepared for the clinic. He should have received 60 rides within the last 90 days with **you** in the saddle. If your horse was ridden three years ago, but you haven't ridden him since, he's not ready for the clinic. It's important for your safety, other participants' safety, your horse's well being and your education that the horse you bring to the clinic is well-prepared. You should be confident riding him on a loose rein at the walk, trot and canter.

- My horse is reasonably manageable, both on the ground and under saddle.
- I understand that Clinton and/or a Clinician will not be able to spend extra time with my horse to the point of disrupting the rest of the class.  
Keep in mind that there are 29 other participants in the clinic who are there to learn from Clinton and advance their knowledge of the Method. Clinton cannot stop the clinic to give one person who is afraid to canter a private lesson. While Clinton has Certified Clinicians at each clinic to help him assist everyone, his job is to spend his time as evenly as possible between 30 participants and help everyone. Be honest with yourself when you're assessing the horse you plan to bring to the clinic.

### Required Documentation:

- I agree to bring with me a **photocopy** of my horse's current negative **Coggins test**. This copy will be retained by Downunder Horsemanship permanently.
- I agree to bring with me a **photocopy** of my horse's current **Health Certificate**. This copy will be retained by Downunder Horsemanship permanently.  
*Important Note: There will not be a photocopier at the clinic. Please have your horse's documentation copied prior to the clinic.*

### Required Equipment: I understand that I need to bring the following equipment in order to participate in the clinic.

- Riding boots. Proper riding boots with a heel are required. No flip flops, tennis shoes or footwear other than approved riding boots will be allowed in the arena.
- Downunder Horsemanship Rope Halter and 14' Lead rope.
- Handy Stick and String.
- Bridle with Snaffle Bit and chin strap (Mecate reins or loop reins with a spanker are highly recommended). **NO SHANK BITS.**
- Well fitting saddle and saddle pad with correctly sized girth.
- Extra girth in a smaller size in case your horse loses weight over the duration of the clinic.  
Most horses shed a few pounds throughout the clinic, so be sure to bring an extra girth that is 2 to 4 inches shorter than your original girth. That way you're prepared and can still participate in the clinic. (Girths can be purchased from the Downunder Horsemanship store as well.)
- Long Line required for Intermediate and Advanced Clinics.

By checking here I certify that I have read the requirements and information presented to me by Downunder Horsemanship.

**Refund Policy:** • Cancellation 120 days before the clinic: 50% deposit refunded.  
• Cancellation 120-60 days before clinic: 25% deposit refunded less \$250 administration fee.  
• Cancellation 60 days or fewer before clinic: No refund.

**I understand that falsification of any information may result in my expulsion from the clinic without a refund.**

**Signature** \_\_\_\_\_



# 2017 Ranch Clinic Application

Corporate Office • 13635 FM 3025 • Stephenville, TX 76401  
Downunderhorsemanship.com • 888-287-7432 • Fax: 254-965-5432

## Medical History and Emergency Contact

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Female     Male

Clinic Helper Name: \_\_\_\_\_ Contact # \_\_\_\_\_

Female     Male

### Whom to Contact in Case of Emergency

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

Cell Phone: \_\_\_\_\_

### Do you have or have you had any of the following in the last 12 months?(If yes please explain)

	Yes	No		Yes	No
Anemia	<input type="checkbox"/>	<input type="checkbox"/>	Hypoglycemia	<input type="checkbox"/>	<input type="checkbox"/>
Asthma	<input type="checkbox"/>	<input type="checkbox"/>	Impaired Hearing	<input type="checkbox"/>	<input type="checkbox"/>
Blood Clots	<input type="checkbox"/>	<input type="checkbox"/>	Impaired Vision	<input type="checkbox"/>	<input type="checkbox"/>
Convulsions	<input type="checkbox"/>	<input type="checkbox"/>	Infectious Disease	<input type="checkbox"/>	<input type="checkbox"/>
Depression	<input type="checkbox"/>	<input type="checkbox"/>	Mental Illness	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>	Muscle/Joint Disorders	<input type="checkbox"/>	<input type="checkbox"/>
Emphysema	<input type="checkbox"/>	<input type="checkbox"/>	Neck/Back Injuries	<input type="checkbox"/>	<input type="checkbox"/>
Epilepsy	<input type="checkbox"/>	<input type="checkbox"/>	Need Special Equipment	<input type="checkbox"/>	<input type="checkbox"/>
Fainting	<input type="checkbox"/>	<input type="checkbox"/>	Pregnancy (currently)	<input type="checkbox"/>	<input type="checkbox"/>
Head Injury	<input type="checkbox"/>	<input type="checkbox"/>	Severe Pain	<input type="checkbox"/>	<input type="checkbox"/>
Skin Disorders	<input type="checkbox"/>	<input type="checkbox"/>	Heart/Cardiac Condition	<input type="checkbox"/>	<input type="checkbox"/>
Surgeries	<input type="checkbox"/>	<input type="checkbox"/>	High Blood Pressure	<input type="checkbox"/>	<input type="checkbox"/>
Unconsciousness	<input type="checkbox"/>	<input type="checkbox"/>			

Current Medications: \_\_\_\_\_

I acknowledge the clinics will be physically demanding and I am able to participate.

Signature \_\_\_\_\_

Date \_\_\_\_\_



# 2017 Ranch Clinic Application

Corporate Office • 13635 FM 3025 • Stephenville, TX 76401  
Downunderhorsemanship.com • 888-287-7432 • Fax: 254-965-5432

## Waiver, Release Of Liability, And Indemnity Agreement – Texas Read Carefully Before Signing

I agree to the following agreement with Clinton Anderson Downunder Horsemanship, Inc., an Ohio corporation, d/b/a Downunder Horsemanship (referred to in this document as “Clinician”) as a condition for its allowing me, and persons identified below, to attend and/or participate in one or more clinics or instructional activities with Clinician, be near horses or ponies, handle horses or ponies, ride horses or ponies, receive instruction or guidance (directly or indirectly) in riding, working with, or handling of horses or ponies at any time and at any location under the direct or indirect supervision of Clinician; and/or use equipment (including, but not limited to, halters, lead ropes, headstalls, mecate reins, bits, and handy sticks, or other equipment) on or near horses or ponies before, during, or after the clinic or instructional activity. (All of these activities, individually and collectively, will hereafter be referred to in this document as “The Activities.”)

Name of Contracting Party:

Addresses of Contracting Parties:

Phone: [Home] \_\_\_\_\_ [Business] \_\_\_\_\_ [Cell] \_\_\_\_\_

I also make this agreement on behalf of the following, who is/are my child/ren or legal ward(s):

1. \_\_\_\_\_ Age: \_\_\_\_\_ 2. \_\_\_\_\_ Age: \_\_\_\_\_

Child’s Date of Birth: \_\_\_\_\_ Child’s Date of Birth: \_\_\_\_\_

All parts of this agreement shall apply to me, and the children/legal wards listed above. [We will collectively call ourselves “I,” “me,” or “my” throughout this agreement.] This Waiver, Agreement, and Release of Liability is intended to be valid and binding at all times, now and in the future, when Clinician or his staff permit me (directly or indirectly) to engage in any or all of The Activities at any location.

### IT IS HEREBY AGREED AS FOLLOWS:

1. I have voluntarily requested to engage in any or all of The Activities.
2. *Consideration/Binding Effect.* I am signing this Waiver, Agreement, and Release of Liability in consideration for being allowed to engage in any or all of The Activities. This Waiver, Release of Liability, and Indemnity Agreement is intended to be valid and binding at all times, now and in the future, when Clinician permits me (directly or indirectly) to engage in any or all of The Activities at any time and at any location.
3. *Risks of Equine Activities.* I understand that anyone riding, handling, or even near a horse or pony (these animals will hereafter be referred to as “equines” in this document) can suffer bodily and other injuries. Among other things, equines are unpredictable by nature. For example, when frightened, angry, or under stress, the natural instincts of an equine are to jump forward or sideways, back up quickly, or run away from danger by trotting or galloping. Equines are also known to kick, buck, rear up, spin around, strike, or bite. I know that equines can do any of these things without warning. I also understand that all equines, even if they have no history of inflicting injury, are powerful and have the potential to be dangerous to people and animals that are on, near, or around them.

Further, I understand that riding, handling, or even being near an equine can expose me to numerous hazards, which could include, for example: (a) the propensity of an equine to behave in ways that may result in personal injury or death to a person on or around it; (b) the unpredictability of an equine’s reaction to a sound, sudden movement, or an unfamiliar object, person, or other animal; (c) certain land conditions and hazards, including surface or subsurface conditions; (d) a collision with another equine, animal, or object; and/or (e) the potential of a participant to act in a negligent manner that may contribute to injury to the participant or another, including failing to maintain control over the equine or not acting within the participant’s ability.

I understand that these risks and dangers inherent in equine/farm animal activities can occur with or without negligence on part of Clinician, and I expressly agree to assume them. I also understand that these are some of the risks, and I agree to assume others that are not mentioned here. I am not relying on Clinician to list all possible equine-related risks for me in this document or at any time, now or in the future.

**WARNING**  
**UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE AND REMEDIES CODE), AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES.**



# 2017 Ranch Clinic Application

Corporate Office • 13635 FM 3025 • Stephenville, TX 76401  
Downunderhorsemanship.com • 888-287-7432 • Fax: 254-965-5432

## Waiver, Release Of Liability, And Indemnity Agreement – Texas (continued)

4. WAIVER AND LIABILITY RELEASE/RECOGNITION OF RISKS. As lawful consideration for Clinician allowing me to engage in any or all of The Activities, now or in the future, at any location, and with full knowledge and appreciation of the inherent risks of equine activities, I freely and voluntarily agree to assume the risks involved in any aspect of The Activities at any time. I agree to assume full responsibility for any and all bodily injuries or damages which I or my minor children/legal wards may sustain at any time when engaging in The Activities or while participating of and from all claims, demands, actions, or causes of action (whether they occur now or in the future, and whether they are known or unknown), resulting from either the ordinary negligence of Clinician or of others associated with Clinician, or a violation by any of them of any provision of the Texas Equine Activity Liability Act (except if injury or damage was directly caused by Clinician's gross negligence or willful and wanton misconduct).

I, for myself and for my heirs, administrators, personal representatives or assigns, release, discharge, hold harmless, and agree not to sue Clinton Anderson Downunder Horsemanship, Inc., Clinton Anderson Downunder Horsemanship, L.L.C., Clinton Anderson, and their respective clinicians, officers, directors, managers, members, employees, agents, assistants, representatives, assigns, and others acting of and from all claims, demands, actions, or causes of action (whether they occur now or in the future, and whether they are known or unknown), resulting from either the ordinary negligence of Clinician or of others associated with Clinician, or a violation by any of them of any provision of the Texas Equine Activity Liability Act (except if injury or damage was directly caused by Clinician's gross negligence or willful and wanton misconduct). *It is my intention to release and hold harmless Clinton Anderson Downunder Horsemanship, Inc., Clinton Anderson Downunder Horsemanship, L.L.C., Clinton Anderson, and their respective clinicians, officers, directors, managers, members, employees, agents, assistants, representatives, assigns, and others acting on their behalf, to the fullest extent allowed under Texas law.*

WAIVER AND LIABILITY RELEASE PERTAINING TO EQUINE(S). In addition, with respect to each equine that I own, lease, ride, handle, use, or provide for any of The Activities (whether or not I am the one who is working with the equine), I agree to release and discharge Clinton Anderson Downunder Horsemanship, Inc., Clinton Anderson Downunder Horsemanship, L.L.C., Clinton Anderson, and their respective clinicians, officers, directors, managers, members, employees, agents, assistants, representatives, assigns, and others acting on their behalf, of and from all claims, demands, actions, or causes of action (whether they occur now or in the future, and whether they are known or unknown), resulting from ordinary negligence of Clinician or of others associated with Clinician. This waiver and release is intended to apply at all times before, during, or after The Activities take place at any location that may result in injury, loss, or damage to this/these equine(s) and that may accrue from any cause whatsoever, including accidents, illnesses, theft, running away, and/or injuries that may occur before, during, or after any of The Activities (except if injury or damage was directly caused by Clinician's gross negligence or willful and wanton misconduct).

5. INDEMNIFICATION. I also agree to indemnify and hold harmless Clinton Anderson Downunder Horsemanship, Inc., Clinton Anderson Downunder Horsemanship, L.L.C., Clinton Anderson, and their respective clinicians, officers, directors, managers, members, employees, agents, assistants, representatives, assigns, and others acting on their behalf against all liability, claim, loss, action or expenses which are sustained, suffered, or incurred by any third person(s) that I may cause (directly or indirectly) while engaging in any or all of The Activities at any time and at any location in connection with my attendance or participation in the clinic or instructional activity with Clinician. ["Third persons" are any and all people who are not parties to this Agreement and includes, but is not limited to, my relatives, guests, other clinic participants, spectators, or visitors, etc.]. The indemnification shall include reimbursement of Clinician's reasonable attorney fees.

6. Helmets/Safety. I agree to be responsible for my own safety. Wearing a helmet is my choice; Clinician has advised me that I should consider purchasing and wearing properly fitted and secured ASTM-standard (F 1163)/SEI-certified protective equestrian headgear when riding, handling, or when near equines. I am NOT relying on Clinician or anyone affiliated with Clinician to provide a certified equestrian helmet for me, to check any helmet or helmet strap that I may wear, or to monitor my compliance with this suggestion at any time – now or in the future. If I choose to wear an ASTMstandard/SEI-certified equestrian helmet and headgear, or if I choose not to, this is my decision alone.

7. Emergencies. Person(s) to Contact in Case of Emergency:

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

Phone No.: \_\_\_\_\_ Cell Phone No.: \_\_\_\_\_ Pager No.: \_\_\_\_\_





# 2017 Ranch Clinic Application

Corporate Office • 13635 FM 3025 • Stephenville, TX 76401  
Downunderhorsemanship.com • 888-287-7432 • Fax: 254-965-5432

## Waiver, Release Of Liability, And Indemnity Agreement – Texas (continued)

8. *Health and Physical Conditions.* Many physical conditions or disabilities pose special physical risks to the participant during exercise. Horseback riding, handling horses, and equine activities are exercise. I understand that Clinician recommends that I seek the advice of a physician before participating in any of the Activities. Also, I want Clinician to be aware of the following physical conditions I have that may affect my ability to ride an equine, handle an equine, be near an equine, and/or attend or participate in a clinic, program, or educational event:

9. *Use of Photographs or Videotapes.* By my signature below, I also irrevocably grant full permission for Clinician or others affiliated with and authorized by Clinician, to use and publish any photographs, videotapes, or electronic recordings taken of me, even if such use and publication is for commercial or promotional purposes.

10. *Independent Trainers/Clinicians/Instructors.* I am aware that independent trainers, clinicians, and/or instructors may occasionally do business near, or at the same time as, Clinician, but I understand they operate as wholly independent businesses and are not employees, partners, or in joint venture with Clinician.

11. This Waiver, Release of Liability, and Indemnity Agreement is governed by Texas law and is intended to be as broad and inclusive as Texas law permits. This document can only be modified in writing and signed by me and Clinton Anderson. Should any clause conflict with Texas law, only that clause will be null and void and the remainder of this document shall stay in full force and effect at all times, now or in the future. Should I breach this Waiver, Release of Liability and Indemnity Agreement (or any part of it) I agree to pay the attorney’s fees and court costs related to such breach incurred by Clinician and/or persons directly affiliated with Clinician. It is also mutually agreed that any disputes arising under this Waiver, Release of Liability, and Indemnity Agreement, or any activities that are undertaken pursuant to this document, shall be litigated in a State or Federal Court of proper jurisdiction located in or nearest to Erath County, Texas, where Clinician resides and transacts business, and I agree that this is a convenient location.

12. Also, I represent that (check each box below):

- I am at or over 18 years of age;
- I am of sound mind, and not suffering from shock or under the influence of alcohol, drugs, or intoxicants;
- I have read this entire waiver, agreement and release of liability (all three pages), and I fully understand it;
- I am aware that this document is legally binding and that by signing it I am giving up legal rights and/or remedies;
- I intend for this waiver, agreement and release of liability to be valid and binding today and at all times in the future; and the information I have provided in this waiver, agreement and release of liability is true and accurate.

Signature Of Contracting Party: \_\_\_\_\_ Date : \_\_\_\_\_

Signature - Clinician  
(Or Clinician’s Authorized Representative): \_\_\_\_\_

Date: \_\_\_\_\_

**WARNING**  
**UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE AND REMEDIES CODE), AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES.**



# 2017 Ranch Clinic Application

Corporate Office • 13635 FM 3025 • Stephenville, TX 76401  
Downunderhorsemanship.com • 888-287-7432 • Fax: 254-965-5432

## Safety Helmet/Protective Headgear Statement – Texas

PRINT NAME OF CLINIC PARTICIPANT: \_\_\_\_\_

ADDRESS OF CLINIC PARTICIPANT: \_\_\_\_\_

I, for myself and/or on behalf of my child or legal ward, have been fully warned and advised by Clinton Anderson Downunder Horsemanship, Inc., an Ohio corporation, d/b/a Downunder Horsemanship (hereafter, "Clinician") that I should purchase and wear properly fitted and secured ASTM-standard/SEI-certified protective headgear (helmet and strap) that is designed for use by equestrians when riding or near horses or ponies in order to reduce the severity of some head injuries and possibly prevent death from happening as the result of a fall or other occurrences. I am not relying on Clinician or anyone affiliated with Clinician to provide a certified equestrian helmet or headgear for me, to check any helmet or strap that I may wear, or to monitor my compliance with this suggestion at any time – *now or in the future*. **If I choose to wear an ASTM-standard/SEI-certified helmet and headgear, or if I choose not to, this is my decision alone.**

**I HAVE READ THIS STATEMENT CAREFULLY BEFORE SIGNING.**

SIGNATURE:

CLINIC PARTICIPANT: \_\_\_\_\_

DATE: \_\_\_\_\_

### WARNING

**UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE AND REMEDIES CODE), AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES.**





# 2017 Ranch Clinic Application

Corporate Office • 13635 FM 3025 • Stephenville, TX 76401  
Downunderhorsemanship.com • 888-287-7432 • Fax: 254-965-5432

## Release for the use of Photo, Name, and/or Story

I consent to the use of my picture, videotaped image or likeness and/or name and any related narrative by Downunder Horsemanship in any news story, publication, video, training material or advertising of any kind or in any manner in which Downunder Horsemanship may decide to use it.

I am 18 years of age or older and am competent to sign in my own name. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release.

---

Signature

---

Date

---

Printed Name

---

Date

## General Information

### Clinic Check-In:

Clinic Check-in will occur the day before the clinic start date from **Noon to 4PM** in the arena office at the end of the clinic driveway. Please have copies of your current coggins and Health Certificate for your horse; Downunder Horsemanship will permanently keep these copies for their records. You will be directed to the clinic horse runs, RV, and trailer parking. Stall and RV space assignments will be given out during clinic check-in.

### Basic Schedule:

**Clinic format could change without notice.**

#### *Morning Session:*

9:00 AM - 10:30 AM	Classroom
10:30 AM - 12:30 PM	Groundwork

**Lunch: 12:30-2:30**

#### *Afternoon Session:*

2:30 PM - 5:00 PM	Riding
-------------------	--------

### Certified Clinicians will be available daily from 8-9AM and from 5-6PM for additional instruction.

This is extra time for you to get help if you feel like you're falling behind, need more specific help with a certain exercise or would like more critiquing. Clinton wants to ensure that you get as much time as you need to succeed and that your clinic experience is above and beyond what you expect.

### Other Important Information:

- No hand guns or firearms of any kind are allowed on the Downunder Horsemanship Ranch.
- No shavings are allowed (horses are bedded on sand).
- Grain and hay will not be available or provided by Downunder Horsemanship (Available for purchase locally at feeds stores in Stephenville).
- You will receive an e-mail 10 Days before the start date of your clinic containing the clinic gate code.
- **Gaited Horse** - Your gaited horse will be required to canter during the clinic.
- **Pets** - No dogs or other pets are allowed at the ranch.
- **Videotaping** - We have a strict policy against videotaping at the ranch. This includes cell phones. If you are found videotaping anything on Downunder Horsemanship property, your camera will be confiscated and you will be asked to leave the ranch.
- **Smoking** - The Downunder Horsemanship Ranch is a smoke-free facility. If you are found to be smoking, you will be asked to leave.
- **Spectators** - No spectator tickets will be sold. Each participant is allowed one helper (18 years or older) who will be admitted free of charge to the clinic.
- **Product Purchases** - You may purchase tack, accessories and apparel in our Corporate Office Monday-Friday from 8AM-5PM. Feel free to call the office prior at 888-287-7432 to place your order and have it ready to pick up upon arrival.
- The same horse and rider combination are required throughout the duration of the clinic - No Exceptions.
- **Trucks and trailers are only allowed down at the runs during loading and unloading.**

**Please help us maintain our roads.**

## Ranch Directions

### Ranch Address:

13635 FM 3025  
Stephenville, TX.

The ranch's physical address may not work properly with GPS Navigation and will not guide you there. It is best to use the coordinates below or enter the nearest intersection depending upon the route of travel.

### GPS LOCATION:

N 32° 17' 13.155" W 98° 16' 6.373"

N 32° 17.219251' W 98° 16.877289'

32.286989° -98.281288°

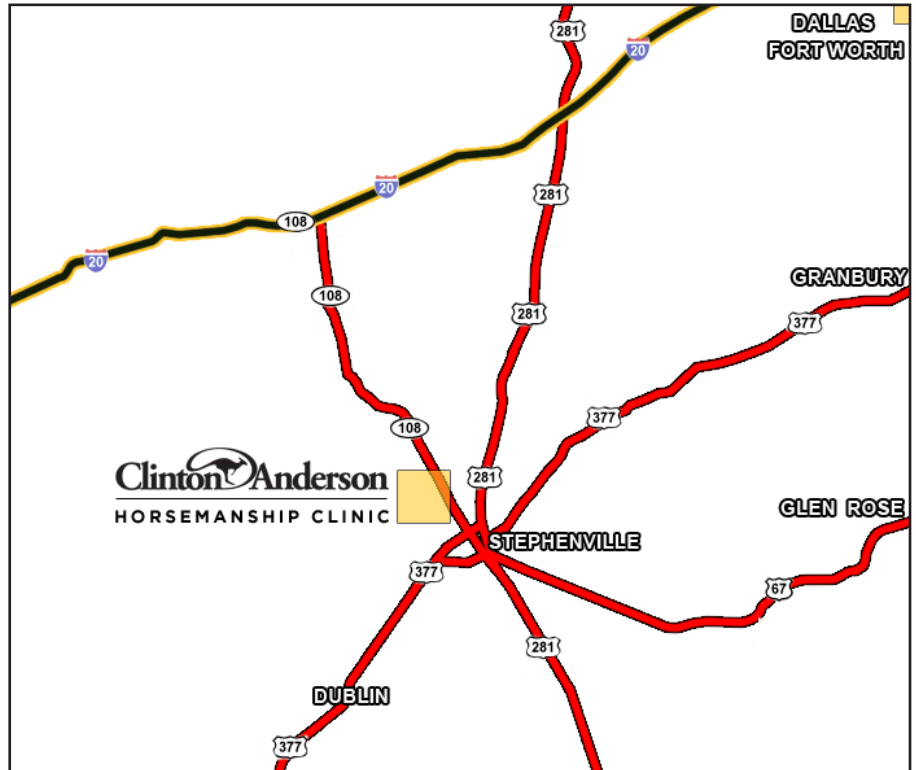
### Directions From I20:

- From **I20** take *Exit 386* (Stephenville)
- Take **281 South**
- 20 miles
- Turn right on **FM 3025** – a great landmark is the 4 rail cedar post fence on your left.
- Take **FM 3025** 4 Miles to the intersection of **108** at blinking yellow light continue straight through.
- Cross **108**, continuing 2 miles on **3025** to the Ranch entrance.
- Ranch entrance is on the left.

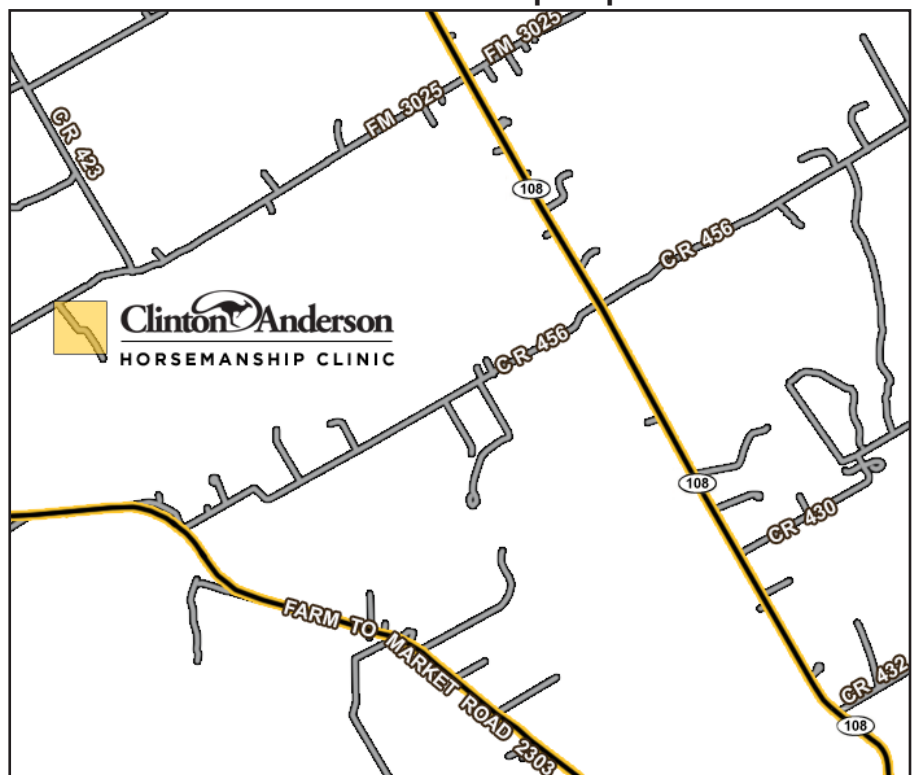
### Direction From I35:

- From **I35 W N** take *Exit 26A* (Cleburne, **US 67**, Dallas)
- Turn onto **US 67** heading South West
- About 70 miles from **67 S** Look for **HWY 281**.
- Bear right onto **281** and follow through Stephenville.
- Take **281 North** approximately 6 miles to **FM 3025** on your LEFT.
- Take **FM 3025** 4 Miles to the intersection of **108** at blinking yellow light, continue straight through.
- Cross **108**, continuing 2 miles on **3025** to the Ranch entrance.
- Ranch entrance is on the left.

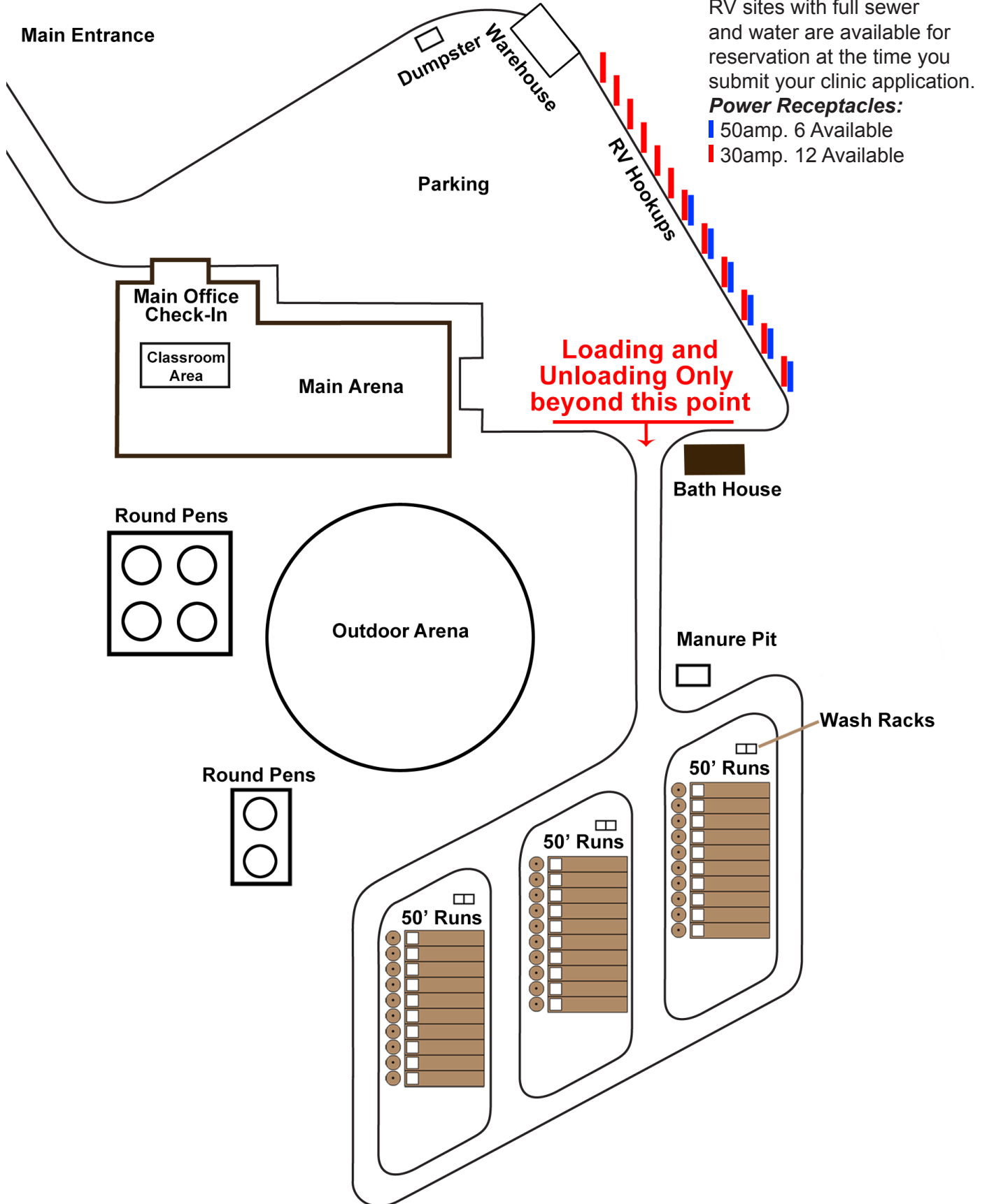
### Overview Map



### Ranch Close-up Map



## Ranch Map



## Around Stephenville

Check out the Stephenville Chamber of Commerce's Website at [www.StephenvilleTexas.org](http://www.StephenvilleTexas.org) for more local information and maps.

### Area Hotels:

-  • **Holiday Inn Express & Suites**  
121 Lockhart St - 254-965-8899
-  • **La Quinta Inn and Suites**  
105 S Christy Plaza - 254-918-2444
-  • **Hampton Inn & Suites**  
910 S. Harbin Dr. - 254-918-5400

### VET:

-  • **Brazos Valley Equine Hospital**  
20069 N US HWY 281 - 254-968-7898


### Feed Stores:

-  • **Coopers Country Store**  
861 S. Graham  
254-968-5633
- **Taylor Feed**  
220 W Lingleville Rd  
254-968-4455
- **Rockin' R Ranch Supply**  
2798 W. Washington St.  
254-965-0950
-  • **Tractor Supply Company**  
2900 W Washington  
254-965-8900

### Need to arrive early?

-  • **Hoof Prints Ranch RV Park and Horse Motel**  
1495 S US Hwy 281  
254-968-4393
-  • **Lazy Days Cabins**  
1912 S. State HWY 108  
254-965-5843

### Laundromat:

-  • **Speed Wash Laundry**  
160 E HWY 8  
254-968-5848

### Farrier:

- **Dale Lyons**  
254-965-7523

### Locksmith:

- **Jason Glich**  
254-485-4282

### Restaurants: – Some recommended places to eat!

-  • **The Agave Bar and Grill**  
1907 E Washington St - 254-968-5222
-  • **Bull Nettle Bar & Grill**  
1755 W South Loop - 254-918-0106
-  • **Hard Eight Barbeque (A personal favorite of Clinton's)**  
1091 Glen Rose Rd - 254-968-5552
-  • **Cotton Patch Cafe**  
2860 W Washington St - 254-965-5255
-  • **Jalisco Restaurant**  
865 W Washington St - 254-965-2655

### Hospital:

-  • **Harris Methodist Hospital**  
411 N Graham St - 254-965-1500

### Popular Locations:

-  • **Walmart, HEB, Chilis, Subway, & more fast food**
-  • **Movie Theatre, CiCi's Pizza Buffet, Golden China**



## Clinic Success Tips

Take advantage of the success tips listed below to ensure that you and your horse have the best possible clinic experience learning the Method personally from Clinton.

- You will spend hours desensitizing your horse to the Handy Stick and string throughout the clinic. Before you arrive, practice spanking the ground 100 times with each arm every day for 3 weeks prior to the clinic.
- Practice riding your horse on a loose rein at the walk, trot and canter every day for 30 days before coming to the clinic.
- Be honest with yourself and your riding ability. A Clinton Anderson Horsemanship Clinic is not for a beginner rider. Even Fundamentals Level Clinics are not designed for those brand new to horses, learning how to ride. If you're a beginner, contact one of Clinton's Professional or Certified Clinicians for private lessons or find a lesson barn in your area.

Remember, the more prepared you and your horse are, the more progress you'll experience.