



Equestrians Institute Driving 2021 Combined Driving Clinic

June 7-10, 2021

Donida Farm, Auburn, WA

Name: _____
 Address: _____
 City, State, Zip: _____
 Email: _____
 Phone: _____
 Essential Person(s): _____

Medical armbands or Road ID are required for all participants.

Helmets and safety vests are required for marathon activities.

Questions?
 Contact Diana
diana@einw.org
 425-466-4845

Please Circle: Driver Auditor

If auditing, please indicate which days: (please circle)

Monday Tuesday Wednesday Thursday

| | | | | | | | | | | |
|--|------|------------|-----|--|------|----------------------------------|---|--------|--------------|----------|
| Equine class I'm bringing: (Circle all that apply) | | | | Turnout I'll be driving: (Circle all that apply) | | | Division I'd like to work at: (Circle all that apply) | | | |
| Horse | Pony | Small Pony | VSE | Single | Pair | Multiple (Tandem, Unicorn, Four) | Training | Prelim | Intermediate | Advanced |

| Equine Name | Age | Height | Sex | Color | Breed | Clinic Driver Fee: \$800 | \$ _____ |
|-------------|-----|--------|-----|-------|-------|--|------------|
| | | | | | | EI member discount** Subtract \$100 | (\$ _____) |
| OR | | | | | | Audit fee: # days _____ x \$30 = | \$ _____ |
| | | | | | | EI member discount** | |
| | | | | | | Subtract # days _____ x \$10 = | (\$ _____) |
| | | | | | | Stall fee: # of stalls _____ x \$150 = | \$ _____ |
| | | | | | | Additional stall nights (if approved) | |
| | | | | | | # stall-nights _____ x \$35 = | \$ _____ |
| OR | | | | | | Haul-in fee: \$25 per stall per day | \$ _____ |
| | | | | | | Extra Shavings: #bags _____ x \$10 = | \$ _____ |
| | | | | | | Medical armband: \$10 each | \$ _____ |
| | | | | | | Donation: EI is a 501(c)(3) Non-Profit org. | \$ _____ |
| | | | | | | Total Fees Owed: | \$ _____ |

Approx. arrival time: _____
(Stalls available starting at 1 PM)

Please stable near: _____

Truck + Trailer length _____
(Truck + trailer length is required when submitting entry)

Pay by check payable to "Equestrians Institute" or pay by credit card at [PayPal.me/eidriving](https://www.paypal.com/merchot) (Add \$25 credit card service fee)

Mail entries to: Dorothy Whiteman
 177 Newman Creek Rd.
 Elma, WA 98541

Special Considerations: (such as navigator, medical restrictions, sharing equipment or navigator or other personnel, etc.)

Entry Checklist:

| | | |
|--|---|--|
| <input type="checkbox"/> Fees paid by check or PayPal? | <input type="checkbox"/> All blanks filled in? | <input type="checkbox"/> Truck + Trailer length entered? |
| <input type="checkbox"/> Separate disclaimer(s) for driver and each essential personnel? | | |
| <input type="checkbox"/> Vaccination/Vet papers included? | <input type="checkbox"/> Para-driving cert. (if applicable) | |

A \$250 deposit will hold your place as a driver in the clinic. Full amount is due by April 10.

** Join EI today and get the EI member discount. To join, go to our website at www.einw.org