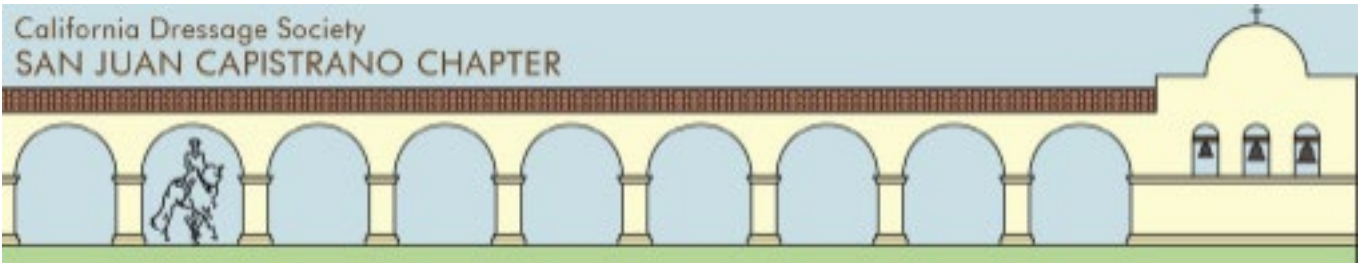


California Dressage Society
SAN JUAN CAPISTRANO CHAPTER



SJC – CDS Adult Amateur Clinic Application

Name: _____

Address: _____

Email: _____

Cell: _____

Chapter: _____

CDS 2019 Membership # _____

Rider Experience Bio:

Name, Breed, Level/accomplishments, and Age of your Horse:

Please return to Airpegasus.2008@gmail.com as soon as possible! If possible, SJC will sponsor 2 riders to attend this year's Southern AA Clinic at Shadow Ridge in Highland, CA March 8-10. The SJC board will pick randomly from the applications. Thanks!