



COACH EDUCATION REGISTRATION FORM

Use this form to register for up to three (3) different workshops/clinics.

1. Clinic/Workshop: _____ Fee: \$ _____
Date: _____ Location: _____
2. Clinic/Workshop: _____ Fee: \$ _____
Date: _____ Location: _____
3. Clinic/Workshop: _____ Fee: \$ _____
Date: _____ Location: _____

OE #	EC#	NCCP#
First Name	Last Name	
Address	City/Province	Postal Code
Phone	Email	Birthdate (YYYY/MM/DD)

Equestrian Background (Coaching Certification, Rider Levels, etc.):

Payment in Canadian dollars MUST accompany this form to conform your registration.

Registration fees include HST. Registrations WILL NOT be accepted via phone.

PAYMENT METHOD:

Cheque Money Order VISA MasterCard Payment Total: \$

Card #: _____ Expiry Date: _____ CVS#: _____

Name on credit card:

Signature of cardholder:

A 25% administration fee will be applied to refunds requested. However, NO REFUNDS will be granted less than 14-days prior to the date of the course or for no-shows. OE reserves the right to cancel session(s) due to unforeseen circumstances or insufficient advance registration. If OE cancels the course, you will receive a full refund. OE cannot accept responsibility for expenses incurred as a result of the cancellation of a course.

Return completed Registration form with payment to Ontario Equestrian:

1 West Pearce Street, Suite 201, Richmond Hill, Ontario L4B 3K3

E-Mail: c.szafranski@ontarioequestrian.ca

Telephone: 905-709-6545 **Toll-free** 1-877-441-7112 **Fax:** 905-709-1867