

NELSON & DISTRICT RIDING CLUB

Application for use of the NDRC grounds to conduct clinics/lessons.  
Dates applied for in 20\_\_ to be approved by the Executive.

Name of Applicant \_\_\_\_\_

Name of Instructor/Coach/Clinician \_\_\_\_\_  
(if different than above)

Qualifications of Instructor/Coach/Clinician \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dates/days required \_\_\_\_\_

\_\_\_\_\_

Arena(s) required \_\_\_\_\_

Describe benefits & anticipated results: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

For Official use only:

Is this approved as a rental of the grounds event \_\_\_\_\_ or

is this approved as a club affiliated event \_\_\_\_\_ ?

(This decision affects the method of payment that may be used by the applicant ie

1. 10% of fees collected go to the NDRC for rental of the grounds.
2. All fees received paid directly to NDRC. Coach uses this form to invoice NDRC for full costs (the 10% grounds rental fee is waived).

Date copy of Insurance received \_\_\_\_\_