

Centered Riding® Instructor Course Student Rider Application



COURSE LOCATION _____ DATE _____

Please complete this application and return it to the clinic organizer at least 2 weeks before Part 2 of the CR Instructor Course. Course clinician needs to review Student Riders' applications in order to make teaching assignments.

NAME _____ ADULT JUNIOR (AGE) _____

STREET ADDRESS _____

CITY (INCLUDE ZIP IF PRECEDES CITY) _____ STATE/PROV. _____ ZIP _____

PHONE: _____ Email: _____

PLEASE NOTE: STUDENT RIDERS ARE TAUGHT BY INSTRUCTORS PARTICIPATING IN THE CENTERED RIDING INSTRUCTOR COURSE, UNDER SUPERVISION OF THE CLINIC INSTRUCTOR(S). THE PURPOSE OF THE LESSONS IS TO GIVE THE PARTICIPATING INSTRUCTORS HANDS-ON EXPERIENCE IN TEACHING CENTERED RIDING BASICS AND BODYWORK.

MY LEVEL IS:

- BASIC (CAN RIDE A GENTLE HORSE AT WALK & TROT)
- NOVICE (CAN RIDE A GENTLE HORSE AT WALK & TROT, SOME CANTER/LOPE)
- INTERMEDIATE (CAN RIDE WITH CONTROL AT WALK, TROT & CANTER/LOPE)
- ADVANCED (EXTENSIVE TRAINING & EXPERIENCE IN ONE OR MORE DISCIPLINES)
- INSTRUCTOR OR TRAINER
- RIDING GREEN HORSE
- OTHER (PLEASE DESCRIBE):

WHAT KIND OF RIDING DO YOU DO, AND TO WHAT LEVEL IN EACH?

- HUNT SEAT:
- EVENTING:
- STOCK SEAT:
- SADDLE SEAT:
- PLEASURE/RECREATIONAL RIDING:
- DISTANCE RIDING/ENDURANCE
- THERAPEUTIC RIDING:
- OTHER:

DO YOU TAKE LESSONS OR WORK WITH AN INSTRUCTOR? IF SO WITH WHOM?

HAVE YOU HAD ANY EXPERIENCE WITH CENTERED RIDING AND/OR OTHER BODY AWARENESS METHODS?

(IF BRINGING A HORSE) PLEASE DESCRIBE THE HORSE YOU WILL BE RIDING (AGE, TRAINING, ETC.)

(IF REQUESTING A SCHOOL HORSE) PLEASE TELL US WHAT KIND OF HORSE YOU ARE COMFORTABLE RIDING.

DO YOU HAVE ANY CONDITIONS, LIMITATIONS, OR PROBLEMS WHICH THE CLINIC INSTRUCTORS SHOULD BE AWARE OF (INJURIES, MEDICAL RESTRICTIONS, ETC.)? IF SO, PLEASE DESCRIBE:

WHAT WOULD YOU LIKE TO LEARN AS A STUDENT RIDER IN THIS CLINIC?

HAVE YOU ANY PROBLEMS (BALANCE, BODY DIFFICULTIES, CONFIDENCE, ETC.) YOU WOULD LIKE HELP WITH?

(PLEASE USE ADDITIONAL PAPER OR THE BACK OF THIS PAPER IF YOU NEED MORE ROOM.)

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