

Live Equestrian - Teddy Franke - Clinic Request

Sponsor Name _____ Phone _____ Email _____
Mailing Address _____

Host Facility
Name _____ Phone _____ Email _____
Address _____

Clinic/Event Type

- | | |
|---|--|
| <input type="checkbox"/> Instructor Certification (CHA) | <input type="checkbox"/> Ranch Roping Clinic |
| <input type="checkbox"/> Skills Clinic (CHA) | <input type="checkbox"/> Pack and Trail Clinic |
| <input type="checkbox"/> Expo/Conference | <input type="checkbox"/> Hoof care |
| <input type="checkbox"/> Horsemanship | <input type="checkbox"/> Facility Consultation or (CHA) Site Accreditation |
| <input type="checkbox"/> Mustang Clinic | <input type="checkbox"/> Other |
| <input type="checkbox"/> Jaquima Clinic | |

Please Return top portion of this page to:

"Teddy Franke" Clinic Request 80906 Shadybrook Rd Tygh Valley OR 97063 or email to rockingtff@gmail.com

Information about Teddy Franke

Teddy Franke is a lifelong horseman and equine educator with a passion for sharing his knowledge and skills with others. He and his family own and operate Mission Farrier School in Tygh Valley, Oregon, while also co-owning an online horsemanship and event program called Live Equestrian. Teddy holds five international certifications in horsemanship, including the title of CHA certified Master Instructor (MI) and Certifier. Teddy is an AQHA Professional Horseman, a TIP Trainer through the MHF, and a board member for the Certified Horsemanship Association. Teddy enjoys competing in ranch and stock horse shows, ranch roping, and wild to willing mustang adoption events. He takes great pride in developing up-and-coming horsemen and women. Born and raised in Alaska, Teddy now resides in Tygh Valley, Oregon, where he trains horses, cowboys, and provides general and therapeutic hoof care. In the spring and fall seasons he can be found training up the next generation of hoof care professionals through Mission Farrier School. Teddy continues to share his faith and knowledge with others, guiding them on their journey to becoming accomplished equestrians.



**Contact Info
Teddy Franke**

9070-687-6047 - rockingtff@gmail.com - liveequestrian.net

General Requirements to Host

Requirements vary for each clinic, certification or event type. In general host facilities or sponsoring agents will be asked to provide a reasonable area to perform equestrian activities of the type desired. They will be asked to furnish accommodations and meals during event hours and provide travel expense.

The event sponsor or the host site must provide a certificate of commercial general liability insurance which insures against bodily injury, property damage, personal injury and advertising injury claims arising from the operation of a clinic or operations incidental thereto, with a combined single limit of \$2,000,000 per occurrence, and a general aggregate limit of \$2,000,000. Such insurance shall be endorsed to include Teddy Franke as additionally insured.

Cost Factors

Our desire is to see clinics provide income to the clinic sponsors, and host facilities while also providing an excellent learning experience for participants.

Clinic sponsors can adjust the numbers in the sample below to create a well rounded experience

Cost to host a clinic is *fifty percent of clinic fees plus expense. We recommend a clinic fee of \$300 per day*

A max of ten participants per event is recommended

Sample Clinic Cost Factors

Income			
Clinic Participant Fee	\$600	Clinician Travel	\$100
Number of Participants	10	Meals	\$80
Number of auditors (Suggest \$10)	4	Lodging	\$220
		Payment to Clinician (\$50% of clinic Income)	\$3020
		Insurance	\$300
		Host Facility	\$1000
Total	(Gross Income) \$6040		(Total Expense) \$4720.00
		Total net income for host	\$1320

Schedule

Clinics can be scheduled a variety of ways but a guideline is to keep sessions to about two hours. They can be somewhat intense so often participants need a break to process what they are learning. Also horses often benefit from the down time. We work with clinic sponsors to create a schedule that works with each situation.

Sample two day schedule:

Day 1		Day 2	
10am - 12pm	Morning Session	10am - 12pm	Morning Session
Lunch		Lunch	
1pm - 2:00pm	Early Afternoon Session	1pm - 2:00pm	Early Afternoon Session
3pm - 5pm.	Late Afternoon Session	3pm - 5pm.	Late Afternoon Session
Dinner			
6pm - 7pm	Unmounted 1 hour Session	Wrap up	

Release Form - Required for all Participants

LIABILITY RELEASE FORM FOR EQUINE ACTIVITIES

Live Equestrian LLC and Teddy Franke

I, (X _____), hereby voluntarily participate in equine activities conducted by Live Equestrian LLC and Teddy Franke.

I ACKNOWLEDGE AND UNDERSTAND THAT:

Equine activities involve inherent risks, including but not limited to the risk of injury, disability, or death, which may result from the unpredictable nature and behavior of horses.

I am participating in these activities voluntarily and of my own free will, and I am aware of the risks involved.

In consideration of being allowed to participate in these activities, I hereby release and forever discharge Live Equestrian LLC, Teddy Franke, their agents, employees, and representatives from any and all claims, demands, actions, or causes of action, whether for personal injury, property damage, or wrongful death, arising out of my participation in equine activities.

I agree to indemnify and hold harmless Live Equestrian LLC and Teddy Franke from any claims, demands, lawsuits, or actions brought by third parties as a result of my participation in equine activities.

I acknowledge that I have read and understood the terms of this release form and that I have had the opportunity to consult with legal counsel if I have any questions or concerns.

I provide the following emergency contact information:

Emergency Contact Name: [_____]

Emergency Contact Phone: [_____]

I certify that I do not have any known medical conditions, disabilities, or allergies that could affect my participation in equine activities. If I do have any such conditions or allergies, I will disclose them to Live Equestrian LLC and Teddy Franke.

I, the undersigned, have carefully read and voluntarily signed this Liability Release Form for Equine Activities.

Participant's Signature: X _____ Date: _____

PARENTAL/GUARDIAN CONSENT (if Participant is a Minor):

I, [Parent/Guardian Full Name], am the parent or legal guardian of the above-named minor participant. I consent to and authorize my child's participation in equine activities conducted by Live Equestrian LLC and Teddy Franke. I have read and understand the terms of this release form and agree to its provisions on behalf of my child.

I understand that all minors who participate in equine activities conducted by Live Equestrian LLC and Teddy Franke are required to wear an ASTM or SEI approved riding helmet and I agree to enforce this policy with the minor participant I am responsible for.

I, the undersigned participant (or parent/guardian of a minor participant), have carefully read and voluntarily signed this Liability Release Form for Equine Activities Participant's (or Parent/Guardian's)

Signature: X _____ Date: _____