

# Heidi Potter Holistic Horsemanship Event Hosting Contract

Thank you for your interest in hosting an event with Clinician Heidi Potter. Below you'll find the details and responsibilities of all parties involved, a recommended cancellation policy and a request for information needed to market your event. Marketing will begin upon receiving a signed contract back from you. Event registration forms and flyers will be prepared and forwarded if requested.

Host Name/Address:

Host Contact info: Phone/Email	
Facility Name/Address:	
Facility Contact Person's Phone/E-mail	
Clinic Details	
Clinic/Event Name:	Dates Requested:
Is this a Public or Private Event? ☐ Public ☐ Private	
Offering Auditing for the Event? $\square$ No $\square$ Yes, Cost per day	\$
Offering Lease Horses for the Event? $\Box$ No $\Box$ Yes, Cost per	r day \$
<b>Offering Stabling for participants</b> $\square$ No $\square$ Yes, Cost per day	y \$
Offering an Optional Teaching Day for private/semi-priva	te sessions with the clinician following the
clinic? Cost: Private \$85 Semi Private/Group \$70 ☐ No ☐	☐ Yes Date:
Offering Lunch/Drinks:	
☐ Host providing lunch @ \$ per person, per day for: ☐ Host providing lunch for: ☐ Participants Only ☐ All (inc☐ Host adds an extra \$ to clinic fee & includes lunch☐ Potluck ☐ BYO	cluding auditors)
Clinician Clinic Fees \$1250 per Clinic Day $\Box$ 1 Day $\Box$ 2 Da	ay 🗆 3 Day Total \$
Numbers Allowed: Participants Auditors	<del></del>
Covid restrictions and protocols: Will you require?   Proc	of of Vaccinations   Masks

# **Hosting Details**

## **Facility Agrees to provide:**

- An enclosed working or riding area large enough to accommodate the event
- Optional: Horse accommodations for outside participants (Fees payable to facility)
- Optional: Event Lease Horses available (Fees payable to the horse owner or facility)
- An indoor or covered arena on site. If one is not available, then reserving space at a nearby indoor or covered arena in case of inclement weather is required
- A room or space (heated in colder months) large enough for participants to sit and move around in without horses if the event includes an un-mounted (humans only) session

# **Host Agrees to:**

- Distribute event flyers and/or brochures. □ Creating own □ Request from clinician
- Market the event within their horse community, on websites, social media, etc.
- Communicate timely with all interested parties and distribute registration/liability forms
- Maintain a list of participants, auditors and a waiting list if applicable
- Collect forms and payments from participants on behalf of the Clinician. Provide registration forms, the original Liability/Information form and payment to the clinician upon arrival
- Collect and retain all stabling, lease horse and lunch fees if applicable
- Follow all Covid recommended practices
- Reimburse the Clinician for travel expenses exceeding a 3-hour drive (Airfare or Gas)
- Provide or reimburse Clinician for accommodations and lunches
- Provide or reimburse for transportation expenses for any clinic requiring air travel

### **Clinician Agrees to:**

- Teach the event for the agreed upon hours and days
- Assume automobile travel expenses for events within a 3-hour drive
- Provide forms and marketing materials upon request
- Market the clinic at events, on equine websites, event schedules, social media pages, etc. as applicable

### **Event Cancellation Policy:**

• Event Host agrees to provide clinician with a 90-day notice of event cancellation for events requiring air travel and a 60-day notice of cancellation for events requiring travel by car. If the event is cancelled after air travel is purchased the host shall reimburse the clinician any unrefunded fees incurred.

### **Recommended Participant Cancellation Policy:**

•	All event fees collected are non-refundable and paid in full on the first day of the event. Should the
	registered participant or auditor be unable to attend the event their spots and fees are fully
	transferable to another individual of their choosing.

Date:	Signature of Host:
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