

HARRY WHITNEY HORSEMANSHIP CLINICS  
AUDITOR REGISTRATION

WEEK(S) OF: \_\_\_\_\_

NAME: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 EMAIL: \_\_\_\_\_  
 CELL #: \_\_\_\_\_

Registration includes clinician fees, bunkhouse for you, all breakfasts and lunches and 3 dinners during the clinic. By sending in this form, you agree to release from liability Harry Whitney, Mendin' Fences Farm, its owners or designees for the duration of your stay and participation in the clinic.

Cancellation & Payment Policies:

- Cancellation with no penalty until one month before your clinic date. After that, there is a 10% cancellation fee.
- Full payment due **one month before** your clinic date. In order to be assured of sleeping arrangements, please send in a deposit of \$200 (Intensive Week) and/or \$100 (Regular Format Week).

**FEES:** Find the appropriate fees and place that amount **in the far column**. Tally up the amounts for your total and place that amount **in the Total Box**. Registration includes clinician fees, all breakfasts and lunches and 3 dinners, Bunkhouse for the week. (Arrival night includes 1 of the 3 dinners).

Residential = staying on the farm in any capacity

Non-Residential = sleeping off the farm

Type of Registration		Amount
<b>Intensive Week :</b>		
Residential – 6 days + 1 arrival = 7	\$780	
Daily *	\$85/\$75	
<b>Regular Clinic Week:</b>		
Residential – 5 days + 1 arrival = 6	\$ 450	
Daily *	\$ 55/day	
<u>* Multi-Day Discount –</u>		
Daily (no lodging) includes all meals that are served that day regardless of inclusion of dinner or not or whether you choose to eat or not.		
Intensive – 1 <sup>st</sup> four days \$85, regular rate; then, discount to (\$75)		
Regular – (\$55)		
Bunkhouse Nights	\$ 25 x ____	
Deposit		
Total Due		

Make Checks Payable To: **BTE, Inc.**  
 Mail To: 868 Beech Grove Rd.  
 Rogersville, TN 37857

Email: info@mendinfencesfarm.com  
 Phone: 423.327.0008  
 Website: www.mendinfencesfarm.com