

**VADACC Pilates Clinic
with Julie Leiken at HHEC in Hanover, VA
Sunday, January 15, 2012**



About Julie's Pilates-based EquiBalance™

EquiBalance is a unique blend of multiple disciplines including Pilates and equitation. It is designed to elevate your self-awareness, both mentally and physically. Our philosophy is simple, a well-conditioned rider and a well-conditioned horse lead to a better relationship between you and your horse.

We spend so much time conditioning our horse's bodies, but what about our own bodies? If we are crooked in our body, how can we ask our horse to learn to be straight? With EquiBalance the answers become clear, enabling riders to use their new found body awareness to make a better connection with their horse.

Julie spent 10 years in Germany, riding and learning to teach dressage. Back in the states, her sister suffered from an injury and began taking Pilates classes from Pat Guyton, a Ron Fletcher Master Teacher, as part of her rehabilitation. During a visit, she went with her sister to a class and got very excited about the applications of Pilates for riders. She completed a Ron Fletcher Program of Study™, a two-year course taught by Ron Fletcher, a master teacher who was a Martha Graham Dancer and who studied with Joseph Pilates himself. (For more information please visit www.ronfletcherwork.com) After completing this education, Julie began combining her experience teaching dressage with her new knowledge of Pilates and began working with riders of all disciplines. She has also been involved in the beginning stages of Betsy Steiner's Equilates™ Program. "I teach Pilates and I ride it. I am tired of reading articles and books where people have these wonderful things to say about why your horse is the way he is. They will show you and tell you what you are doing wrong, but no one ever really sits down and says, 'Here is your problem, and let me give you these exercises to help you.' Just the knowledge of what is wrong is frustrating; you have to have something that you can do about it. What good is the knowledge that something is weak without the ability to make it strong?"

The purpose of this clinic is to give you ways to evaluate your own strengths and weaknesses and to then address those areas with specific exercises that will help your riding (and your movement in general). By first developing an awareness of how your body works, you can then develop your ability to use it to help your horse use his body in a more efficient way.

The clinic will be divided into two sections:

1. **MAT CLASS** – Un-mounted pilates mat class \$25/VADACC member and \$35/non-members.
2. **MOUNTED SESSIONS**: 50 minute private sessions \$100/VADACC member and \$110/non-members. A shared hour will be \$57.50/each for VADACC members and \$67.50/each for non-members.

Auditing: \$10 for members, \$20 for non-members.

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with Julie Leiken at HHEC in Hanover, VA**

Participant Slots Open & Auditors Welcome- REGISTER NOW!

Date: Sunday, January 15, 2012

Location: HHEC 7400 River Road, Hanover, VA 23069 (Rt. 301 and River Rd.)

Costs for VADACC Members: Private 50 minutes ridden session \$ 100, 2 persons sharing an hour \$57.50 each, Mat class \$25 per person, Auditing \$10

Costs for Non-Members: Private 50 Minute Session \$110, 2 persons sharing an hour \$67.50 each, Mat class \$35 each, Auditing \$20 per person.

All participants and auditors will need to sign a Release on the day of the event.

Contact Hollyn Mangione for more info clshrs3@aol.com or 804-389-1025

*All Participants need to register before January 1st. Preference given to VADACC members.
Auditors can register ahead or walk in.*

REGISTRATION (CHECK ONE):

50 minute private session Shared session with _____

Auditor Mat Class

Name: _____ VADACC Member? Yes or No

Phone Number: _____ Email Address: _____

Horse: _____ Breed: _____

Color: _____ Sex: _____

Challenges: _____

*Mail Registration & payment (checks payable to "VADACC") to:
Hollyn Mangione, VADACC Pilates Clinic, 4125 Riddles Bridge Road, Goochland, VA 23063*

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- Construction Services

6767 Forest Hill Avenue
Suite 204
Richmond, Virginia 23225
(804) 323-3835 Tel
(804) 323-3836 Fax
www.blueskiesassociates.com

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Technical excellence. customized solutions

VADA Central Inc.

RELEASE, ASSUMPTION OF RISK, WAIVER, AND INDEMNIFICATION

This document waives important legal rights. Read it carefully before signing.

I AGREE that I choose to participate voluntarily with my horse(s) as a rider, driver, handler, lessee, owner, agent, coach, trainer, or as a parent or guardian of a junior exhibitor in any equine activities in this event. In consideration of my/my child's participation in any equine activities sponsored by VADA Central Inc, I hereby release and waive my rights and the rights of any of my insurers by subrogation to sue VADA Central Inc and any officers, agents and/or representatives for any loss, damage, injury, or death to person or property sustained by me/my child in equine activities by any cause whatsoever, including the intrinsic dangers of equine activity, such as, but not limited to: (1) the propensity of an equine to behave in dangerous ways that may result in injury or death to a participant or bystander or damage to property; (2) the inability to predict an equine's reaction to sound, movements, objects, persons or animals; (3) hazards of surface or subsurface conditions, whether known or unknown; (4) the experience level of any participant in equine activities; (5) a known or unknown health condition of any participant in such equine activities; and (6) the condition and age of the equipment or tack. I assume all the foregoing risks and any other dangers intrinsic to equine activities and accept complete responsibility for making any and all examinations or inspections relating to those risks and any other potential risks of recreational activities, and I agree and understand that VADA Central Inc shall have no responsibility whatsoever to make any such examinations or inspections. I further assume all risk of, and agree to hold harmless VADA Central Inc and its officers, representatives, or agents, or o the part of any other person with regard to such equine activities. If I am a parent or guardian of a participant in equine activities sponsored by VADA Central Inc, I consent to the child's participation and AGREE to all of the above provisions and AGREE to assume all of the obligations of this Release on the child's behalf.

I acknowledge that I have read the following language from the Code of Virginia relating to limited liability on equine activities which reads:

3.2-6202 Liability Limited, Liability Actions Prohibited

A. Except as provided in '3.2-6206, an equine activity sponsor, an equine professional or any other person, which shall include a corporation, partnership, or limited liability company, shall not be liable for an injury to or death of a participant resulting from the intrinsic dangers of equine activities and, except as provided in '3.2-6203, no participant nor any participant's parent, guardian, or representative shall have or make any claim against recover from any equine activity sponsor, equine professional, or any other person for injury, loss, damage or death of the participant resulting from any of the intrinsic dangers of equine activities.

B. Except as provided in '3.2-6202, no participant or parent or guardian of a participant who has knowingly executed a waiver of his rights to sue or agrees to assume all risks specifically enumerated under this subsection may maintain an action against or recover from an equine activity sponsor or an equine professional for an injury to or the death of a participant engaged in an equine activity. The waiver shall give notice to the participant of the intrinsic dangers of equine activities. The waiver shall remain valid unless expressly revoked in writing by the participant or the parent or guardian or a minor.

I hereby certify that the foregoing statements and representations are being made by me knowingly, freely, and voluntarily, and I understand that VADACC is expressly relying upon the foregoing statements and representations in permitting me/my child's participation in any equine activities.

Date: _____

Signature: _____

Participant, Rider, Owners, Agents If under 18 years parent or guardian must sign)

PRINT:

Name of Participant _____

Parent/Guardian _____

Address _____

Phone Numbers (include area code) Home: _____ Mobile: _____