



TENNESSEE WALKING HORSE BREEDERS' AND EXHIBITORS' ASSOCIATION

TRAIL RIDING INSTRUCTOR APPLICATION

Miss/Ms./Mrs./Mr. _____
First Name Initial Last Name
Address _____ City _____ State _____ Zip _____
Birthdate _____ Telephone _____
Day Evening
Email Address _____

CERTIFICATION REQUIREMENTS:

1. Must be 18 years of age and a member in good standing of TWHBEA.
 2. Complete and submit this TRI Application
 3. Pay Test Fee of \$25
 4. Provide a signed Code Of Conduct
 5. Provide a signed Release and Hold Harmless Agreement
 6. Provide proof of a current CPR Certificate (please attached copy of certificate)
- (Please answer questions 8 & 9 on a separate sheet of paper)*
7. Provide a short biography detailing reasons for wanting to be Certified and a record of your previous horse experience.
 8. Which areas of the TWH are you experienced with through owning, trail riding, instruction, training, etc..? (Endurance, Limited Distance, Competitive Trail, Easy Rider, Non-Registered Easy Rider, others?)
 9. Proof of Riding Ability (Options)
 - a. Submit an iPEDS Record
 - b. Work a TWHBEA Youth Camp and riding for the CRI/TRI's present and a recommendation from them
 - c. Providing a minimum 10 minute video of riding skills to be evaluated by TWHBEA CRI/TRI panel.

10. Teaching Proficiency Proof: Options:

- a. Assist instruct a TWHBEA Youth Camp, receive recommendation from lead CRI/TRI at Camp.
- b. Provide a video of a lesson performing 3 gaits to be evaluated by the CRI/TRI Panel.

11. When you have submitted your application and required materials, TWHBEA will send you a link for online testing. You must pass this test with a score of 85% or better.

Do you require your students to wear protective headgear and footwear with a heel?

Do you, as a role model, wear protective headgear and footwear with a heel? _____

How did you learn about the TWHBEA TRI Program?

Signature _____ Date _____



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TRAIL RIDING INSTRUCTOR CODE OF CONDUCT

- ◆ We hereby acknowledge the **most important priority** of the trainer is the safety of the rider. Any disregard for the safety of the trainer's riders or other riders participating in any TWHBEA Trails event will be deemed a serious violation of the Code of Conduct.
- ◆ TWHBEA Trail Riding Instructors shall conduct themselves in a professional manner while instructing or at TWHBEA Trails Program recognized events.
- ◆ TWHBEA Trail Riding Instructors shall act like professionals and exhibit good sportsmanship at all sanctioned events.
- ◆ TWHBEA Trail Riding Instructors are required to know the rules set forth by the TWHBEA Trails Program and Trail Riding Instructor Guidelines set forth by TWHBEA. Ignorance of these rules will in no way excuse any violation of these rules.
- ◆ It is incumbent upon the trainer to deal with unruly horses, riders or parents quietly and quickly.
- ◆ Disciplining horses in a rough manner as to cause a spectacle at recognized events will not be tolerated.
- ◆ It is paramount that the trainer remembers that the purpose of the program is to provide safe and correct education. Proper education is essential to enjoyment of safe riding.

Signed _____

Dated _____

It will be left to the discretion of the TWHBEA Instructor Certification Committee as to what action will be taken for violations of The Code of Conduct. The TWHBEA Instructor Certification Committee will deal with any violation of the TWHBEA Trail Riding Instructor Guidelines.



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RELEASE AND HOLD HARMLESS AGREEMENT

Name _____ Birthdate _____

Previous Riding Experience _____

For value received by each from the other, the adequacy of which consideration is hereby irrevocably acknowledged I, _____, hereby agree to release, defend, indemnify and hold harmless the Tennessee Walking Horse Breeders' and Exhibitors' Association and their officers, members, employees, servants, and agents from any and all liability (injuries, related injuries, or death of participant), costs, expenses, including attorney's fees, arising out of the riding of horses stabled by or under the supervision of the Tennessee Walking Horse Breeders' and Exhibitors' Association. It is further understood and agreed, I give my express permission for the Tennessee Walking Horse Breeders' and Exhibitors' Association to authorize emergency medical aid treatment where required.

I also am aware of the Tennessee State Law that states:

Under Tennessee Law, an equine professional is not liable for an injury to or the death of a participant in equine activities resulting from the inherent risk of equine activities pursuant to the Tennessee Code Annotated, Title 44, Chapter 20.

Signed _____ Date _____

Address _____

Phone: Home _____
Business _____
Cell _____
Email _____

SAFETY HELMETS ARE REQUIRED.