

EVENT COORDINATOR AGREEMENT

This agreement is between Ryan Rose and event coordinator:

Name: _____

Address: _____

Phone: _____ Email: _____

Event Dates: _____ Clinic _____ Camp _____ Workshops _____ (check one)

Facility Name/Address _____

Event fees: WORKSHOPS ~ \$150 EACH
2 DAY CLINICS ~ \$550 WITH *EARLY BIRD PRICE \$450
3 DAY CLINICS ~ \$695 WITH *EARLY BIRD PRICE \$595
5 DAY CAMPS ~ \$995 WITH *EARLY BIRD PRICE \$895
SPECIALTY CAMPS ~ Contact Cheryl at cheryl@rosehorsemanship.com
for specialty prices.

*Early Bird Price due in full 90 days prior to event date
Auditor Fees: \$30/day with discount on multiple days.

Facility Fees:
***Facility Rental Per Day _____ (not to exceed \$250/day) Total \$ _____

***Stall Fee: _____ **Pen Fee: _____ **RV Onsite Fee: _____ (**per day)

Event Coordinator Compensation for hosting said event:
~ *One participation spot and a private lesson. All auditor fees collected.*

*If there are not enough participants pre-registered to meet the minimum requirements, Ryan Rose reserves the right to cancel this event 2 weeks prior, making this contract null and void. (please contact Cheryl at cheryl@rosehorsemanship.com for the required number of participants).

I agree to these terms and conditions.

Event Host/Coordinator signature _____ Date _____

Ryan Rose signature _____ Date _____

*Please sign and return to Ryan Rose at N8294 County Road E, Brooklyn WI, 53521
www.rosehorsemanship.com
ryan@rosehorsemanship.com
906-364-0379