

JOIN US FOR A SPECIAL
CELEBRATION OF DRESSAGE

Wellington Classic Dressage & DressageClinic.com

PRESENT OUR

Professional Riders Clinic & Symposium

Sponsored by County Saddlery

Featuring Ride Sessions, Demonstrations & Lectures by



Hubertus Schmidt

INTERNATIONAL TRAINER

With Special Presentations By

Steffen Peters

Special Appearance Ride & Lecture

Bo Jena

The Art of Long Lines

Laura King

Equestrian Psychology

Succeed

Animal Wellness

*Professional Riders Including
George Williams, Betsy Steiner,*

*Oded Shimoni, Charlotte Bredahl, Heather Bender,
Shannon Dueck, Bill Warren And More!!*

Friday & Saturday Evening

January 16-17, 2009

**Palm Beach County Jim Brandon Equestrian Center
7500 Forest Hill Blvd, West Palm Beach, Florida**

*Join us for 2 special evenings of
Dressage Training & Exhibitions!*

**What..... Professional Riders' Clinic
& Symposium Featuring
Hubertus Schmidt**

- Friday's cocktail reception sponsored by **Laura King** starting at 3:30pm-4:30pm
- Saturday's cocktail reception sponsored by **ThinLine** starting at 3:30pm-4:30pm.
- 4:30pm-10:30pm demonstration rides, lectures and training sessions
- Butler-style hors d'oeuvres, salad & desert bars, coffee & tea

**When..... Friday & Saturday
January 16-17, 2009. Cocktails
& Reception start at 3:30pm.**

**Where..... Palm Beach County Jim Brandon
Equestrian Center Covered Arena
7500 Forest Hill Blvd
West Palm Beach, FL 33413**

- **VIP Tables:**
\$1,500 per table of 6; \$250 per person
for the 2-day session prepaid before
Dec. 15, 2008
\$1,800 per table of 6; \$300 per person
for the 2-day session after Dec. 15, 2008

For more information, email
tickets@wellingtonclassicedressage.com

Sponsorship & Advertising:
Call **John Flanagan @ 561-714-9058**

Or Visit Our Website:
www.wellingtonclassicedressage.com

Credit Cards Welcome

To register, fill in form below fax to 561-227-1571
Phone orders, please call 561-714-9058

Registration

Date: _____

Payment Amount: \$ _____

Please Specify: Check (enclosed) OR Credit Card

Visa MC AMEX Card No _____ Exp Date _____ 3 Digit Code _____

Name(s) of Attendees (Please print):

Name/Company on Credit Card (Please print): _____ Signature: _____

Billing Address (Please print): _____

City: _____ State: _____ Zip: _____

Phone (Days): _____ Cell: _____ Email: _____

Please make checks payable to:
Wellington Classic Dressage, Inc.
Mail To: 14457 Draft Horse Lane
Wellington, FL 33414