



Persimmon Tree Farm

1030 Bloom Road
Westminster, Maryland 21157-8006

Phone: 410-876-8645

Fax: 410-848-1367

E-mail: Carolyn@PersimmonTreeFarm.com

George Morris Clinic

FRIDAY, SATURDAY & SUNDAY, OCTOBER 3, 4, & 5, 2008

Registration (front) and Liability Release (back)

NAME: _____

ADDRESS: _____

PHONE (S): _____

**RIDERS: \$250 per rider per session for 1 day
\$500 for 2 days, and, to encourage full participation,
\$650 for 3 days**

Each day includes a full day audit for the rider and ONE other person

Those riding for 3 days will be given priority

9AM-11AM: under 3 ft. 11AM-1PM: 3 ft. plus 2PM-4PM: 3 ft. - 6 in. and up

DAY 1: 9AM _____ 11AM _____ 2PM _____

DAY 2: 9AM _____ 11AM _____ 2PM _____

DAY 3: 9AM _____ 11AM _____ 2PM _____

AUDITORS: \$75 per person per day

DAY 1 _____ DAY 2 _____ DAY 3 _____

Total Amount Due = \$ _____

Please make checks payable to: Persimmon Tree Farm (PTF)

**Area Lodging: Best Western – Westminster 410-857-1900
Days Inn - Westminster 410-857-0500**

LIABILITY RELEASE (over) MUST BE COMPLETED