



# Safe Trailering Practices Instructor Application

(please complete both pages)



Name: \_\_\_\_\_  
Date of birth: \_\_\_\_\_  
Email address: \_\_\_\_\_  
Mailing address: \_\_\_\_\_  
Phone number(s): \_\_\_\_\_  
Course date: \_\_\_\_\_  
Course location: \_\_\_\_\_  
Vest Size: \_\_\_\_\_

## Payment method:

- PayPal on website     PayPal Invoice (will be sent to email provided)     Personal Check\*  
 Credit Card (details below)

Credit card number: \_\_\_\_\_

Expiry date: \_\_\_\_\_

CCV: \_\_\_\_\_

\* Make checks payable to "A Stable Connection and mail to 10961 Lake Forest Drive, Conroe, TX 77384, USA

## Enrolling in: Safe Trailering Practices Instructor Training (\$1599.00)

In signing this application, I understand that, as an Equi-Health Canada/Equi-First Aid USA Instructor:  
I will be an independent contractor, responsible for my own business activities  
I will be required to adhere to all Equi-Health Canada/Equi-First Aid USA standards & policies  
I will be required to abide by the Equi-Health Canada/Equi-First Aid USA code of ethics.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Affiliate: A Stable Connection [www.astableconnection.com](http://www.astableconnection.com) 10961 Lake Forest Drive, Conroe, TX 77384, USA.  
Phone: 936-827-5694 email: [lis@astableconnection.com](mailto:lis@astableconnection.com)

Head Office: Equi-Health Canada [www.equi-healthcanada.com](http://www.equi-healthcanada.com) PO Box 551, Station Main, Okotoks, Alberta, Canada T1S 1A7 phone  
(403) 700-9152 fax (403) 982-0957

**Outline your equine, livestock and trailering experience**

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**Have you taken any equine-related or trailering training?**       Yes     No

**What would teaching the course mean to you?**

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**Additional comments**

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**Please save your completed form and email it to: [lis@astableconnection.com](mailto:lis@astableconnection.com)**

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