

Sponsored by Washoe County 4-H Horse Leaders

**FORZA**  
EQUINE



**RANCH HORSE CLINIC DAY**

**SATURDAY, MARCH 7, 2026**

(Snow Date March 14th)

**at UNR Equestrian Center**

1290 Valley Road Reno, NV 88512

**Sessions Dedicated to Ranch Rail & Ranch Riding**

**\$140 per rider per session**

**Auditors \$40 per person**

**Overnight boarding available at UNR Equestrian Center**

**Registration deadline February 21st**

**See registration form for further details and to secure your spot!**



## ABOUT YOUR CLINICIAN



Website: [www.forzaequine.weebly.com](http://www.forzaequine.weebly.com)

Blog Page: [www.forzaequine.weebly.com/blog](http://www.forzaequine.weebly.com/blog)

Facebook: Forza Equine

Instagram: @forzaequine

*2025 WRHA MONEY EARNER*

*2025 3X WRHA WORLD SHOW INVITATIONAL QUALIFIER*

*2024 WORLD RANCH HORSE NATIONAL HIGH POINT*

*2024 OPEN RESERVE CHAMPION - THE OUTRIDER PROGRAM- REGION 1*

*2024 OPEN TOP 5*

*2024 OPEN W/T TOP 3*

*2023 WORLD RANCH HORSE NATIONAL HIGH POINT*

*2023 OPEN RESERVE CHAMPION*

*2023 OPEN W/T TOP 5*

*2023 OPEN CHAMPION- THE OUTRIDER PROGRAM- REGION 1*

Michelle Reeser has 28 years of experience in the equine industry. She began riding horses and teaching summer camp lessons in high school at Cloverleaf Ranch in Santa Rosa, CA. After graduation, Michelle attended the University of California, Davis. There, she competed on the IHSA Western Team, taught beginner and intermediate lessons, summer camp, as well as worked as a barn supervisor, stall cleaner and feeder.

After completing her BS degree in Animal Science and Management, Michelle found her career at the UC Davis School of Veterinary Medicine as a licensed veterinary technician and pharmacy technician. Michelle continued to ride and train several of her own horses as a Non Pro and sought help from local NRHA professionals to further her skills. Most recently, she has successfully competed in NRHA, WCRHA, AQHA, and WRHA events in reining and ranch horse.

Michelle is also a freelance writer and created the blog "Riding with Reeser." She enjoys writing about all things horses & country, health & wellness, and food & garden. Always passionate about what daily life brings, her greatest joy is sharing these experiences with others and helping people recognize their potential by making dreams tangible through achievable goals. When not surrounded by dirt and hooves, Michelle can be found in the kitchen preparing outstanding meals daily for herself, friends, and family.



## **Forza Equine Ranch Clinic Registration Form**

Sponsored by Washoe County 4-H Horse Leaders



Clinic Location: UNR Equestrian Center, 1290 Valley Road, Reno, NV 88512

**Clinic Date: Saturday, March 7, 2026** (Snow Date: Saturday, March 14, 2026)

Rider Fee: \$140 per 1.5 hour session

Auditor Fee: \$40 per day

Stall Fee: \$15/night at UNR Equestrian Center (owner must provide feed and bedding and clean stall)

**Registration Deadline: February 21, 2026**

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Rider's Name \_\_\_\_\_

Rider Age: \_\_\_\_\_

Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact Name and Phone: \_\_\_\_\_

Any Horse or Rider Health Concerns/Limitations: \_\_\_\_\_

Name of Horse: \_\_\_\_\_

Breed of Horse: \_\_\_\_\_

Horse Age: \_\_\_\_\_

Mare or Gelding: \_\_\_\_\_

Previous riding and training experience/level:

\_\_\_\_\_

Primary type of riding you do: \_\_\_\_\_

Problem areas: \_\_\_\_\_

Future plans/goals for this horse: \_\_\_\_\_

Questions or issues you would like addressed at this clinic:

\_\_\_\_\_

Requirements: Riders must be able to walk/trot and/or lope confidently in groups on the flat, as well as have confidence and skill to expose their horse to new objects and patterns. Helmets are optional and encouraged but only required if under the age of 18.

**Forza Equine Clinic Session Sign Up**  
Sponsored by Washoe County 4-H Horse Leaders

**Clinic Offerings:**

MORNING SESSIONS

**Session 1: 8am-9:30am: Ranch Rail**

**Session 2: 10am-11:30am: Ranch Riding**

*1 hour Lunch Break 11:30-12:30pm*

AFTERNOON SESSIONS

**Session 3: 12:30pm- 2pm: Ranch Rail**

**Session 4: 2:30pm-4pm: Ranch Riding**

Please select which session(s) you plan to ride in (\$140 per session):

- Ranch Rail          Session 1 \_\_\_\_\_          Session 3 \_\_\_\_\_
- Ranch Riding        Session 2 \_\_\_\_\_          Session 4 \_\_\_\_\_

Please select your session time preference in order here. You will be notified what time you will be riding after registration closes.

- 1.
- 2.
- 3.
- 4.

Please select which session(s) you plan to audit (\$40 day fee)

- Ranch Rail          Session 1 \_\_\_\_\_          Session 3 \_\_\_\_\_
- Ranch Riding        Session 2 \_\_\_\_\_          Session 4 \_\_\_\_\_

Will you be needing an overnight stall? Yes    or    No

Lessons will begin promptly at times listed above. Please be tacked up and in the arena ready to work at your scheduled session.

Horses may be ridden in whatever tack is normally worn. Any bit will be acceptable (snaffle, hackamore/bosal, curb/bridle), however, no halters please.

**Payment Information:**

Clinic and stall fees payable by credit card (+ 3.5% service fee) or by Zelle or by check made out to Washoe County Horse 4-H Leaders.

Please select your method of payment below.

- **Credit Card**  
Card Type: \_\_\_\_\_ Card number: \_\_\_\_\_  
  
Exp date: \_\_\_\_\_ CVV: \_\_\_\_\_ Zip Code: \_\_\_\_\_
- **Zelle** [sks4hclub@gmail.com](mailto:sks4hclub@gmail.com)
- **Check** (enclosed with registration packet)

All fees must be received and paid in full at time of registration prior to clinic date. Registration is non-refundable. Please be sure you can attend the main event date **and** snow date in the event of inclement weather and rescheduling.

**Both** Forza Equine and UNR Equestrian Center waivers must be completed and submitted with registration form.

Please send all registration forms, waivers, and payment via mail or email to:

Linda Zimmerman  
12200 Red Rock Road  
Reno, NV 89508  
Email: [sks4hclub@gmail.com](mailto:sks4hclub@gmail.com)



**University of Nevada Reno**  
**WAIVER, RELEASE, AND INDEMNIFICATION AGREEMENT**

## Ranch Horse Clinic

I, \_\_\_\_\_, hereby acknowledge that I have voluntarily elected to participate in the Ranch Horse Clinic at the University of Nevada, Reno ("UNR"), a member institution of the Nevada System of Higher Education ("NSHE"). I understand and agree that the Activity involves certain risks which include, but are not limited to, the following:

1. Traveling to and from the Activity (transportation is not provided by UNR).
2. I am fully aware and acknowledge that horse sports and participation in this event may involve serious risk of harm, including but not limited to, risks of accident, seriously bodily injury, including death, broken bones, head injuries, trauma, pain, suffering and property damage. I assume all risks of harm to me, my horse or my property.
3. Inclement weather that can impact safety (rain, snow, cold, wind, heat).
4. Working with other volunteers from organizations outside of UNR.

Knowing this information and the risks related to this Activity, in consideration of my participation in the Activity, I **expressly** and **knowingly** agree as follows:

**RULES AND REQUIREMENTS:** I agree to conduct myself in accordance with UNR policies and procedures. I further agree to abide by all the rules and requirements of the Activity. I acknowledge that UNR has the right to terminate my participation in the Activity if it is determined that my conduct is detrimental to the best interests of the group, my conduct violates any rule of the Activity, or for any other reason in UNR's discretion.

**INFORMED CONSENT:** I have been informed of and I understand the various aspects of the Activity, including the dangers, hazards, and risks inherent in the Activity, including but not limited to transportation to and from campus via private vehicle, participation in clinic activities, weather conditions, conditions of equipment, facility conditions, negligent first aid operations or procedures, and in any activities I undertake as an adjunct to the Activity. In addition, I understand that as a participant in the Activity, I will engage in activities, including horse back riding and/or near animals during which I could sustain personal injuries, illness, and/or property damage. I understand that as a participant in the Activity I could sustain serious personal injuries, property damage, or even death as a consequence of not only UNR's actions or inactions, but also the actions, inactions, negligence or fault of others or myself, and that there may be other risks not known to me or not reasonably foreseeable at this time. I further understand and agree that any injury, property damage, disability or death that I may sustain by any means is my responsibility except for those occurrences due to UNR's negligence or intentional acts.

**RELEASE AND WAIVER OF LIABILITY:** To the extent authorized by law, I, individually, and on behalf of my heirs, executors, administrators, personal representatives, successors and assigns, hereby release, forever discharge and agree not to sue NSHE and UNR and their officers, employees, agents, volunteers and representatives, from any and all liability, loss, claims, demands, causes of actions (known or unknown), suits, judgments, cost, expense or attorneys' fees, including, but not limited to, those arising from injury, loss or damage to my person or property, which arise out of, occur during, or are in any way the result of or connected with my participation in the Activity, **REGARDLESS OF WHETHER THE INJURY, LOSS OR DAMAGE IS CAUSED BY NSHE OR UNR, UNLESS THE INJURY, LOSS OR DAMAGE IS CAUSED BY NSHE OR UNR'S NEGLIGENCE OR INTENTIONAL ACTS, AND REGARDLESS OF WHETHER THE INJURY, LOSS OR DAMAGE OCCURS WHILE IN, ON, UPON, OR IN TRANSIT TO OR FROM THE PREMISES WHERE THE ACTIVITY OCCURS**

**OR IS BEING CONDUCTED.** I further agree that NSHE and UNR are not in any way responsible for any injury or damage that I sustain as a result of my own acts.

**ASSUMPTION OF RISK:** I understand that there are potential dangers incidental to my participation in the Activity, some of which may be dangerous and which may expose me to the risk of personal injuries, property damage, or even death. I understand that there are potential risks as a consequence of my participation in the Activity which include, but are not limited to the following: travel to and from University property via private vehicles, weather conditions, facility conditions, equipment conditions, first aid operations or procedures, and other risks that are unknown at this time. **I KNOWINGLY AND VOLUNTARILY ASSUME ALL SUCH RISKS, BOTH KNOWN AND UNKNOWN, EVEN IF ARISING FROM THE ACTS OF NSHE OR UNR, UNLESS THEY ARISE FROM NSHE OR UNR'S NEGLIGENT OR INTENTIONAL ACT,** and I assume full responsibility for my participation in the Activity.

**INDEMNITY:** I, individually, and on behalf of my heirs, successors, assigns and personal representatives, hereby agree to indemnify, defend, and hold harmless NSHE and UNR and their employees, agents, and representatives, from any and all liability whatsoever for any and all damages, losses, or injuries (including death) I sustain to my person or property or both, including but not limited to any claims, demands, actions, causes of action, judgments, expenses and costs, including attorneys' fees, which arise out of, result from, occur during, or are connected in any manner with my participation in the Activity.

**PERSONAL MEDICAL INSURANCE:** I understand that neither the NSHE nor UNR will provide health insurance coverage to me during any aspect of my participation in the Activity. I further acknowledge that I am responsible for the cost of any and all medical and health services I may require as a result of participating in the Activity.

**CONTROLLING LAW:** To the extent that I, individually, or my heirs, successors, assigns, or personal representatives bring a claim of any kind whatsoever against NSHE and/or UNR and/or their employees, agents, and representatives, I agree that this Waiver, Release and Indemnification Agreement is to be construed under the laws of the State of Nevada, including the provisions of Nevada Revised Statutes Chapter 41.

**SEVERABILITY:** If any term or provision of this Agreement shall be held invalid, illegal, unenforceable, or in conflict with any law governing this Agreement the validity of the remaining portions of the Agreement shall continue in full legal force and effect.

I hereby acknowledge that I have read this entire document, that I understand its terms, that by signing it I am giving up substantial legal rights I might otherwise have, and that I have signed it knowingly and voluntarily.

Participant's Name: \_\_\_\_\_

Participant's Signature: \_\_\_\_\_

Dated: \_\_\_\_\_

**If participant is a minor:**

I am the parent or legal guardian of the Participant. I hereby acknowledge that I have read this entire document, that I understand its terms, that by signing it I am giving up substantial legal rights that I or the Participant might otherwise have, and that I have signed it knowingly and voluntarily. I allow Participant to participate in this Activity. I understand that I am responsible for the obligations and acts of Participant as described in this document. I agree to be bound by the terms of this document.

Guardian's Name: \_\_\_\_\_

Guardian's Signature: \_\_\_\_\_

Dated: \_\_\_\_\_

**Riding Instruction Agreement and Liability Release Form**

FORZA EQUINE (hereinafter known as "FE") and Michelle Reeser (hereinafter know as "Instructor")

Location \_\_\_\_\_

This form must be completed by and for each participant. Please read carefully before signing. Serious injury may result from your participation in this activity.

A. REGISTRATION OF RIDER/PARTICIPANT AND AGREEMENT PURPOSE: By signing this agreement, I, the following listed individual, and the parent or legal guardian(s) thereof if a minor, (hereinafter known as RIDER), do hereby voluntarily request and agree to participate in horseback riding and/or riding instruction as a student of INSTRUCTOR and FE.

STUDENT NAME: \_\_\_\_\_

PARENT/LEGAL GUARDIAN: \_\_\_\_\_

AGE(if minor): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMERGENCY CONTACT NAME AND PHONE #1: \_\_\_\_\_

EMERGENCY CONTACT NAME AND PHONE #2: \_\_\_\_\_

Does the RIDER have any physical or mental limitations which may affect his/her/they ability to participate in any equine activity? YES \_\_\_\_\_ NO \_\_\_\_\_

If YES, please

describe: \_\_\_\_\_

B. SCOPE OF AGREEMENT AND DEFINITIONS: This agreement shall be legally binding upon me, the RIDER, and the parent or guardians thereof if a minor, my heirs, estate, assigns, including all minor children and parental representatives. This agreement shall be interpreted according to the laws of the State of California. Any disputes by the RIDER shall be litigated in Sacramento County. If any clause, phrase or word is in conflict with the laws of the State of California then that single part is null and void. The term "HORSE" herein shall refer to all equine species. The term "HORSEBACK RIDING" or "RIDING" herein shall refer to riding, instruction in, or otherwise handling of or being near horses or ponies, whether from the ground or mounted. The term "RIDER" shall herein refer to a person who rides a horse or otherwise handles or comes near a horse from the ground. The terms "I", "me", and "my" shall herein refer to the above RIDER and the parents and legal guardians thereof if a minor.

C. INHERENT RISK OF EQUINE ACTIVITIES: I understand that horseback riding is considered a rugged adventure sport recreational activity and that here are numerous obvious and non-obvious inherent risks always present in such activity despite all safety precautions. As such, related injuries can be severe, even deadly.

- D. NATURE OF RIDING HORSES: I understand that no horse is completely safe. If a horse is frightened or irritated, it may divert from any training it has received and act according to its natural survival instincts which may include but are not limited to: stopping short, changing directions or speed at will, shifting its weight, bucking, rearing, kicking, biting, running into or under obstacles, or running from perceived danger.
- E. RIDER RESPONSIBILITY: I understand that, notwithstanding the presence or participation of an instructor or trainer, upon mounting a horse and taking up the reins, the RIDER is in primary control of the horse. The rider's safety largely depends upon his/her/they ability to carry out simple instructions, and his/her/they ability to remain balanced aboard the moving animal. The RIDER shall be responsible for his/her/they own safety and that of an unborn child if the rider is pregnant. Pregnant women should ride horses only under the advice of their physician. INSTRUCTOR and FE advises pregnant women not to ride horses.
- F. CONDITIONS OF NATURE AND INSPECTION OF PREMISES and EQUIPMENT: I understand that INSTRUCTOR is not responsible for total or partial acts, occurrences, or elements of nature that can scare a horse, cause it to fall, or react in some other unsafe way. Some examples are: thunder, lightening, rain, wind, wild and domestic animals, insects, reptiles, which may walk, run, fly near, or bite or sting a horse or person; and irregular or obstructed footing on groomed or wild land (including indoor or outdoor arenas, pens, pastures or driveways) which is subject to constant change in condition according to use, weather, temperature, maintenance, and natural and man-made changes in landscape. Further still, INSTRUCTOR and FE is not responsible for activities engaged in by others that may scare a horse. The rider and parent or legal guardian have inspected the premises and equipment used by INSTRUCTOR and FE, and are satisfied that all premise and equipment conditions are reasonably safe for the riders's intended purpose, usage and presence.
- G. ACCIDENT/MEDICAL INSURANCE: Should emergency medical or other treatment be required, I understand that I, and/or my own accident/medical insurance company shall pay for all incurred expenses. I shall also pay any medical insurance deductibles.
- H. PROTECTIVE HEADGEAR WARNING: I agree that for myself and on behalf of my child and/or legal ward, that I have been fully warned and advised by INSTRUCTOR and FE that protective headgear, meeting or exceeding the quality standards of the SEI CERTIFIED ASTM STANDARD should be purchased and worn while riding and being near horses, and that I do understand that the wearing of such headgear at these times may reduce the severity of some of the wearer's head injuries and possibly prevent the wearer's death from happening as the result of a fall and other occurrences. I understand that I must provide my own, well fitting, certified riding helmet, and that INSTRUCTOR and FE requires that such helmet must be worn at all times while mounted on a horse by minors under the age of 18 and strongly recommended by all other age riders.

I am over the age of 18, and I have **DECLINED** wearing a helmet despite the dangerous nature of horseback riding activities and the recommendation to wear a helmet while mounted at all times by my INSTRUCTOR and FE.

NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

- I. LIABILITY RELEASE: I agree that, in consideration of INSTRUCTOR and FE allowing my participation in this activity, under the terms set forth herein, I, the RIDER, for myself and on behalf of my child and/or legal ward, heirs, administrators, personal representatives or assigns, do agree to hold

harmless, release, and discharge INSTRUCTOR and FE, its owners, agents, employees, officers, directors, representatives, assigns, members, volunteers, owners of premises and trails, affiliated organizations, and insurers, and others acting on its behalf (hereafter collectively known as "ASSOCIATES"), of and from all claims, demands, causes of action, and legal liability, whether the same be known or unknown, anticipated or unanticipated, due to INSTRUCTOR'S, FE's, and/or its ASSOCIATES ordinary negligence; I do further agree that except in the event of INSTRUCTOR'S or FE's gross negligence and willful and wanton misconduct, I shall not bring any claims, demands, legal actions and causes of action, against INSTRUCTOR, FE, and its ASSOCIATES as stated above in the clause, for any economic and non-economic losses due to bodily injury, death, property damage sustained by me and or my child and/or legal ward in relation to the premises, equipment and operations of INSTRUCTOR and FE, to include while riding, handling or otherwise being near horses owned or used by, or in the care custody and control of INSTRUCTOR and FE, whether on or off the premises used by INSTRUCTOR and FE.

I/WE, THE UNDERSIGNED, HAVE READ AND DO UNDERSTAND THE FOREGOING AGREEMENT, WARNINGS, RELEASE AND ASSUMPTION OF RISK. I/WE FURTHER ATTEST THAT ALL FACTS RELATING TO RIDERS PHYSICAL CONDITION, EXPERIENCE AND AGE ARE TRUE AND ACCURATE.

SIGNATURE OF RIDER: \_\_\_\_\_

PRINT NAME OF RIDER: \_\_\_\_\_

DATE: \_\_\_\_\_

SIGNATURE OF PARENT/LEGAL GUARDIAN DATE (IF RIDER IS A MINOR):  
\_\_\_\_\_

PRINT NAME OF PARENT/LEGAL GUARDIAN: \_\_\_\_\_

DATE: \_\_\_\_\_

## STABLE RULES

Everyone who rides horses under FORZA EQUINE (“Stable”) is subject to the following Stable Rules as may be amended from time to time at the Stable’s sole discretion:

1. The Stable is a community. Please treat other members of the community with respect, courtesy and consideration. Safe, considerate and courteous behavior of each rider, family member and guest is required at all times! Your safety is our primary goal.
2. **RELEASE AND WAIVER REQUIRED:** All riders must execute and deliver a Hold Harmless Liability Waiver and Release before participating in any equestrian activities.
3. **HELMETS REQUIRED: ALL PERSONS UNDER THE AGE OF 18 RIDING AT THE STABLE MUST WEAR AN ASTM APPROVED HELMET AT ALL TIMES WHILE RIDING OR MOUNTED.** It is **STRONGLY** recommended that all riders, regardless of age, wear an approved safety helmet while mounted.
4. **CLOTHING REQUIRED:** All persons riding with the stable must wear boots with heels and long pants.
5. **LESSONS and CANCELATION:** Please notify your instructor at least 24 hours in advance if you cannot attend a scheduled lesson. The instructor and instructor travel time and/or horse have been reserved for your use. There will be a charge for any lesson if the Stable is not timely notified that you will be absent.
6. **FACILITIES:** All visitors and riders are to be aware of specific facility rules and must follow these facility rules while participating in horseback riding instruction under FORZA EQUINE.
7. **CHILDREN:** No one shall leave a minor under the age of 16 unattended on the facility property. Minors under the age of 16 (hereinafter referred as “Children”) must be under the direct supervision of a responsible adult at all times.
8. **NO SMOKING or ALCOHOL.** Smoking and consumption of alcohol is **NOT** permitted anytime or anywhere while mounted and under the instruction of FORZA EQUINE, except where specifically approved by facility management.
9. **DOGS:** Please follow facility rules regarding dogs. FORZA EQUINE does not allow dogs at the arena or tack up areas when riders are under instruction.
10. **GUESTS:** It is the responsibility of each rider sponsoring a Guest to make sure that the Guest(s) are aware of, and follow, these Stable Rules and those rules of the facility. Anyone not in compliance may be asked to leave the lesson area and/or property without notice. No Guest may handle or ride a horse unless that Guest shall have first signed and delivered a Hold Harmless Liability Waiver and Release to Stable management and Stable management has approved and countersigned the Hold Harmless Liability Waiver and Release.
11. **HANDLING HORSES:**
  - a. Respect animals **ALWAYS!**
  - b. Never walk or stand behind a horse.
  - c. Keep a safe distance between horses (horse length).
  - d. If a horse gets loose, yell “Horse Loose” and move to a safe position. Use good common sense.

12. ARENA USE:

- a. You must follow all facility rules regarding clean up after your horse.
- b. Please follow all Arena Rules, and the Arena Etiquette posted en route to the arena.

13. FORZA EQUINE is not responsible for lost or stolen articles and/or tack.

I HAVE READ AND FULLY UNDERSTAND THE AFORESAID RULES, AGREE TO ABIDE BY THEM AS AMENDED FROM TIME TO TIME, AND WILL BE RESPONSIBLE FOR MY FAMILY'S AND GUESTS' AWARENESS AND COMPLIANCE WITH THESE RULES.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: (Parent or Legal Guardian): \_\_\_\_\_

Printed Name: (Parent or Legal Guardian): \_\_\_\_\_

Date: \_\_\_\_\_

12. ARENA USE:

- a. You must follow all facility rules regarding clean up after your horse.
- b. Please follow all Arena Rules, and the Arena Etiquette posted en route to the arena.

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Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: (Parent or Legal Guardian): \_\_\_\_\_

Printed Name: (Parent or Legal Guardian): \_\_\_\_\_

Date: \_\_\_\_\_