

ADS Member Driving Instructors

Name:		ADS #:			
Address:		Phone:	Phone:		
Email:		Website:			
Social Media:					
Teaching location:			States in which you teach:		
I have equines you can	drive: Yes	N	0		
I teach: Adults	Youth	Both	l am a clinician:	Yes	No
I offer training for:	Developed	l equines	Novice equines	Untraine	ed (green) equines
I have instructor's liabili	Yes, exp	iration date:	· · · · · · · · · · · · · · · · · · ·	No	
Services offered:					
Areas of expertise:	Combined Driving		Pleasure Driving	Recreational Driving	
Experience:					
Professional Membersh	nips:				
Licensed Officials Card	s Held:				
Education/Training:					
References:					