



2071 – 216th Street Langley BC
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Phone (604) 789-0150
Website: www.windsum.ca

Winter Dressage Schooling Series 2014/15

BC Heritage Qualifier, BC Summer Games Qualifier

October 5, 2014

November 2, 2014

February TBA, 2015

March TBA, 2015

Judges: TBA

Please circle test choices:

- | | | | |
|------------------------------|---|---|---|
| 1. Walk / Trot | 1 | 2 | 3 |
| 2. Western Walk/Jog or Intro | 1 | 2 | 3 |
| 3. Training Level | 1 | 2 | 3 |
| 4. Western Training or Basic | 1 | 2 | 3 |
| 5. First Level | 1 | 2 | 3 |
| 6. Western First or Level 1 | 1 | 2 | 3 |
| 6. Second Level | 1 | 2 | 3 |
| 7. Third Level | 1 | 2 | 3 |
| 8. Fourth Level | 1 | 2 | 3 |
| 9. TOC | | | |

Traveling/stable with: _____

Rules:

- All tests to be ridden in 20m x 60m arena
- Boots and bandages allowed
- Rider must be HCBC member
- Rider must wear helmet and boots
- Neat attire
- Maximum three tests per horse
- Other levels and Para tests can be requested (arena size will be appropriate)
- You can miss 1 show in the series and still be eligible for Series High-Point Awards
- **Only** completed entries will be accepted
- **Absolutely NO dogs allowed on property**

* Ribbons awarded to 4th place *

HCBC Tests will be used (unless otherwise specified or supplied by exhibitor) and can be found at the following link: <http://www.hcbc.ca>

_____ x \$30 per test ridden

\$25 per day stall

Please include a \$25 stall deposit cheque to be returned when stall is cleaned

Sub total

87525 4906 RT0001 5% GST

Total

\$

Have you enclosed?

- photocopy of HCBC for Owner & Rider
- Liability Release (signed & witnessed)
- Entry Cheque
- Stall Deposit Cheque

Entries close 6pm of the Monday before. Day stalls are limited, first come first serve.

Times will be posted on our website and Emailed the Friday before the show.

Please make cheques payable to: Windsum Enterprises Ltd

Mail to: PO Box 61568 Brookwood PO, Langley, BC V3A 8C8

Or drop of at Windsum

Name _____ Horse _____

Address _____

Phone # _____ HCBC # _____

Date of Show _____ Email _____

Please circle one: Junior AA/Open

Show will go, rain or shine



LIABILITY RELEASE

TO: *WINDSUM ENTERPRISES LTD.*
of 2071 – 216th Street, Langley, BC V2Z 1P6

PLEASE READ CAREFULLY

THE UNDERSIGNED in consideration of being permitted to enter on and/or use the land and premises of Windsum Enterprises Ltd. (the "Owner") located at:

2071 – 216th Street, Langley, BC V2Z 1P6 (the "Premises")

do for myself, my administrators, executors, successors and assignees UNDERTAKE AND AGREE to hold the Owner, operators and the instructors, and their respective administrators, executors, successors and assignees harmless, and release from all liability whatsoever, with respect to any loss, damage, injury or death suffered by the undersigned either with respect to their respective persons or their property of any nature whatsoever (including without restricting the generality of the foregoing) saddles, tack or horses by any cause whatsoever including the default or negligence of the Owner, and its operator(s), instructor(s), and employees, and including damage by fire, theft (it being specifically herein agreed that it is not the responsibility of the Owner or operator to insure the property of the undersigned or his/her infant children against loss by fire or theft or all the foregoing) injury to myself or my infant children while riding on or off the Premises or caused by any horse stabled or otherwise on the Premises and the undersigned FURTHER UNDERTAKES AND AGREES that in the event of such loss, damage, injury or death the undersigned shall not and shall not suffer or permit to commence an action in any court against the Owner or operator with respect to any such loss, damage, or injury on behalf of him/herself or his/her infant children.

The undersigned hereby represents that he/she is in proper physical condition to participate in the activities to be engaged, in particular horse-back riding.

The undersigned acknowledges, and is aware that, participation in the activity of horse-back riding, and other associated activities can cause severe physical injury to the person.

In recognition of having read, understood, and agreeing to the terms of this Liability Release, I have signed this Liability Release on this ____ day of _____, 201__ at Langley, British Columbia.

Participants Name

Witnesses Name

Participants Signature or Parent/Guardian
(Parent must sign if Participant is under 19 years of age)

Witnesses Signature

Address: _____

Home phone: _____ Work phone _____

Email: _____