



Cavaletti Clinic With Erika Jansson
 August 22-23, 2020
 El Sueno Equestrian Center 5250 Kingsgrove Rd Somis, CA

Rider cost
 \$65.00 Ventura Chapter CDS members
 \$70.00 Current CDS members
 \$75.00 Non CDS Members

Haul in \$35.00 per Horse
 Stabling \$155.00 Friday-Sunday Portable stall 10x10
 Day Stall \$ 50.00

Rider _____ Riding Level _____
 Address _____
 City _____ State _____ Zip _____
 Phone _____ Email _____
 Horse _____ Schooling Level _____
 Clinic Day _____ Saturday _____ Sunday _____ Both Days

Make checks payable to Calif Dressage Society VC Chapter
 Mail to Jen Nunes 543 Aileen St Camarillo, CA 93010
 805-603-0309 jennunes2360@yahoo.com

Entry Agreement

By entering this Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaultor or Longeur and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the Rules of USEF, California Dressage Society and the local rules of the Competition. I agree to release and hold harmless the competition, CDS, their officials, directors and employees for any action taken under the Rules. I represent that I am eligible to enter and/or participate under the Rules, and every horse I am entering is eligible as entered.

I also agree that as a condition of and in consideration of acceptance of entry, USEF and/or the Competition may use or assign photographs, videos, audios, cable - casts, broadcasts, internet, film, new media or other likenesses of me and my horse taken during the course of the competition for the promotion, coverage or benefit of the competition, sport, or the Federation. Those likenesses shall not be used to advertise a product and they may not be used in such a way as to jeopardize amateur status. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to compensation, invasion of privacy, right of publicity, or to misappropriation.

**Release, Assumption of Risk, Waiver, and Indemnification
 This document waives important legal rights. Read it carefully before signing.**

I AGREE in consideration for my participation in this Competition Cavaletti Clinic @ El Sueno Equestrian Center to the following:

I AGREE that CDS and the "Competition" as used herein includes the Competition Management, as well as all of their officials, officers, directors, employees, agents, personnel, volunteers and Federation affiliates.

I AGREE that I choose to participate voluntarily in the Competition with my horse, as a rider, lessee, owner, agent, trainer, or as parent or guardian of a junior exhibitor. I am fully aware and acknowledge that horse sports and the Competition involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering, or death.

I AGREE to hold harmless and release USEF, CDS and the Competition from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm of any nature caused by me or my horse to others, even if the Harm arises or results, directly or indirectly, from the negligence of the Federation or the Competition.

I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the Federation or the Competition.

I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the Federation and the Competition and to hold them harmless with respect to claims for Harm to me or my horse, and for claims made by others for any Harm caused by me or my horse while at the Competition. I have read the Federation Rules about protective equipment, including GR801 and, if applicable, EV114, and I understand that I am entitled to wear protective equipment without penalty, and I acknowledge that the Federation strongly encourages me to do so while WARNING that no protective equipment can guard against all injuries. If I am a parent or guardian of a junior exhibitor, I consent to the child's participation and AGREE to all of the above provisions and AGREE to assume all of the obligations of this Release on the child's behalf. I represent that I have the requisite training, coaching and abilities to safely compete in this competition.

I AGREE that if I am injured at this competition, the medical personnel treating my injuries may provide information on my injury and treatment on the official USEF accident/injury report form.

BY SIGNING BELOW, I AGREE to be bound by all applicable Rules and all terms and provisions of this entry blank and all terms and provisions of this Prize List. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same validity, force and effect as if I affixed my signature by my own hand.

SIGN ALL THREE LINES, EVEN IF SAME PERSON - MANDATORY

RIDER / DRIVER / HANDLER

1. Signature _____

Print Name _____

OWNER / AGENT

2. Signature _____

Print Name _____

TRAINER: Adult on grounds with responsibility for the horse

3. Signature _____

Print Name _____

EMERGENCY
 CONTACT PHONE
 NUMBER

MANDATORY

SIGN IF APPLICABLE

COACH Signature _____

Print Name _____

PARENT / GUARDIAN

Signature _____

Required if Rider/Handler is a minor

Print Name _____