CAMPBELL VALLEY EQUESTRIAN SOCIETY

2021 DRESSAGE SHOW SERIES

BC Summer Games Qualifier Prince George 2022

Location: Equestrian Centre, Campbell Valley Regional Park; 1255 208th St. Langley BC

**SHOW DATES**: ~~April 25,~~ ~~May 15~~, Jun 26, Sept 18 Please check [**www.cves.ca**](http://www.cves.ca) for entry forms + any changes.

**Organizer**: Janeen Penner cell: 604-897-0005 email: [janeenpenner@gmail.com](mailto:janeenpenner@gmail.com)

**Send entries to Show Secretary:** Marilyn Gregory

email: [gregmarilyn@shaw.ca](mailto:gregmarilyn@shaw.ca) 604-371-0587

**Entries close: 6:00 pm Sunday before each show. Payment MUST be submitted with entry.**

**Cost: $25 CVES members; $30 non-members Payment by e-transfer to cves.ca@gmail.com**.

**Awards: Prizes to 3rd place**

**CVES Highpoint: Year-end high points awarded to divisions (or combination of divisions depending on number of entries) based on the total of your scores for the year. You must have entered at least 2 shows to qualify.**

**Ride Times: Will be posted on website by Thursday night before the show**

**Tack and Dress:** HCBC rules regarding tack will be followed. Boots and bandages are allowed. All riders, regardless of age or level of competition, must wear ASTM/SEI or BSI approved protective headgear with safety harness correctly secured at all times while mounted.

**Scratches**: Must be received by the entry secretary by the closing date. Late scratches need a vet or medical certificate; otherwise you will forfeit your entry fees.

**Rules:**

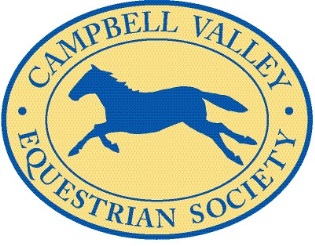
***It is the responsibility of the show/event committee, or organizers and the facility owners and managers to ensure that all BC Health Authority and WorkSafeBC directives are followed and enforced. Horse Council is not a regulatory body and it is understood and agreed that sanctioning and approval of either a HCBC Provincial circuit event or Equestrian Canada Bronze or Silver competition relates to the use of the rule book and approved officials only.***

***This Competition is a Horse Council BC provincially sanctioned Competition and will be governed in accordance with the Horse Council BC Rule Book. Knowledge of the Rules is the responsibility of the Competitor.***

***The Horse Council BC Rule Book, will be used and can be found at the following link:*** [***http://www.hcbc.ca/Competition-Documents.html***](http://www.hcbc.ca/Competition-Documents.html) ***General Rules***

***Neither Horse Council BC, its Board of Directors, organizing committee, staff, volunteers, officials, or employees of this horse show, will be responsible in any way, for damage, injury, or loss to persons, horses or property of exhibitors, spectators, owners, riders, trainers, or grooms. All competitors and owners of horses must be members of Horse Council BC to participate***

**Parking:** Might not be in the main lot, parking attendant or signs will direct traffic. Please check our website for info.

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**ENTRY FORM**

**CVES Membership**:

Do you wish to become a CVES member at $20.00 /year to receive $5 discount per test? YES  NO

(include membership form with entry or join online www.cves.ca)

Membership entitles you to entry discounts and all funds raised go toward upkeep of the Campbell Valley Equestrian Facilities.

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| **Use the check boxes to select which tests you would like and indicate how many if riding the same test more than once** | | | | | |  | **Indicate test of choice (TOC) to be entered.** | | | | |
| **Classes: Please check 2019 EC Test number** | | | | | | **# of Tests** | **7. Exhibition TOC (FEI, HCBC, Para, Western, etc)** | | | | |
| **1** | **Introductory** | **EC** | **A** | **B** | **C** |  | Click or tap here to enter text. | | | | |
| **2** | **Training Level Test** | **EC** | **1** | **2** | **3** |  | **8. Eventing (2016)** | |  |  | **Number of tests** |
| **3** | **First Level Test** | **EC** | **1** | **2** | **3** |  | **Entry** | | **1** | **2** |  |
| **4** | **Second Level Test** | **EC** | **1** | **2** | **3** |  | **Pre-Training** | | **1** | **2** |  |
| **5** | **Third Level Test** | **EC** | **1** | **2** | **3** |  | **Training** | | **1** | **2** |  |
| **6** | **Fourth Level Test** | **EC** | **1** | **2** | **3** |  | **Preliminary** | | **1** | **2** |  |
|  |  |  |  |  |  |  | **Other** | Click or tap here to enter text. | | | |

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| **BC Horse Council membership is mandatory for both Owner and Rider. Please enclose photocopy of 2021 cards. Waiver (page 2) must be signed. Juniors must ensure a parent or guardian has also signed the waiver.** | | | | |
| Horse’s name: | | Colour: | | Year Foaled: |
| Rider’s Name: | | Breed: | | Mare Gelding Stallion |
| Address: | | Junior  Senior | | Rider Birth Year: |
| City: | Province: | Postal Code: | | |
| Phone: | HCBC# | Email: | | |
| Owners Name: | | | | |
| Phone: | HCBC# | | Email: | |

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|  | **Campbell Valley Equestrian Society** |
| the “**Organizer**”  **Event Participation Waiver** |

**WAIVER OF LIABILITY FOR ALL CLAIMS AND RELEASE OF LIABILITY**

**PLEASE READ CAREFULLY BEFORE SIGNING**. Completed waivers must be returned with registration or prior to attending the Organizer’s event: CVES Dressage Show (the “**Event**”).

By signing below, the Participant (named below) and/or the Participant’s Guardian represents that the Participant:

1. Has not travelled internationally during the last 14 days;
2. Does not knowingly have COVID-19;
3. Is not experiencing known symptoms of COVID-19, such as fever, cough, or shortness of breath, and if experiences such symptoms during the Event will immediately depart from the Event;
4. Has not, in the past 14 days, knowingly come into contact with someone who has COVID-19, who has known symptoms of COVID-19, or is self-quarantining after returning to Canada; and
5. Follows government recommended guidelines in respect of COVID-19, including practicing physical distancing, and will do so to the best of the Participant’s ability during the Event.

In addition, by signing below the Participant and/or the Participant’s Guardian understands, acknowledges and assumes the inherent risks in participating in the Event, including, but not limited to: the potential for bodily injury or illness (including contraction of COVID-19); contact or interaction with others who may have been exposed to COVID-19; permanent disability, paralysis, or loss of life; collision with natural or manmade objects; dangers arising from adverse weather conditions; imperfect venue or field of play conditions; equipment failure; participants of varying skill levels; inadequate safety measures; circumstances known, unknown or beyond the control of the Organizer, its partners, sponsors, agents, affiliates, directors, employees, officer, therapists, or volunteers (together, the “**Organization**”); negligence or omission of the Organization (collectively, the “**Risks**”).

In consideration for allowing the Participant to participate in the Event, the Participant and/or the Participant’s Guardian: (a) release, discharge and forever hold harmless the Organization from any and all liability for damages or loss arising as a result of the Risks of participation in or in connection with the Event; (b) waive any right to sue the Organization in respect of all causes of action (including for injuries or illness caused by their own negligence), claims, demands, damages or losses of any kind that may arise as a result of the Risks of participation in or in connection with the Event, including without limitation the right to make a third party claim or claim over against the Organization arising from the same; and (c) freely assumes all risks associated with the Risks, anything incidental to the Risks, which may arise as a result of participation in or in connection with the Event. **YOU ARE GIVING UP LEGAL RIGHTS TO ANY AND ALL FUTURE CLAIMS AGAINST THE ORGANIZATION.**

I confirm that I have read and fully understand this waiver and release of liability. I sign this waiver and release of liability voluntarily without any inducement, assurance, or warranty being made to me.

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| **Print Name:** |  | **Date of Birth:** |  |
|  | the “**Participant**” |  | (mm/dd/yyyy) |
|  |  |  |  |
| **Print Name:** |  |  |  |
|  | The “**Guardian**” (if Participant is a minor) |  |  |
|  |  |  |  |
| **Signature:** |  | **Date:** |  |
|  | Participant or Guardian for minor |  | (mm/dd/yyyy) |
|  |  |  |  |
| **Signature**: |  | **Date:** |  |
|  | Owner |  | (mm/dd/yyyy) |