

# **DRESSAGE COMPETITION CLINIC**

**SHORELINE RIDERS, INC**

**30601 Turner Road, Fort Bragg, CA**

**Sunday, April 25th, 2021**

**Rides Start at 9 a.m. ~ Entries Close April 17<sup>th</sup>, 2021 ~**

(Entry form pending Board approval, Riders will be notified of any pertinent changes)

JUDGE:

Gail McGuffey, USDF Gold Medalist and an L-Judge Program Graduate,  
Business owner of the Dressagearena.com, a sport horse training and sales facility

Manager: Jeanette Jacobi

This is a clinic to get you ready for the show season. You will ride your Dressage Test of Choice. The Judge will score your first ride and give you feedback. After that you will get to ride the test again to improve your score. Each ride will be approximately a half hour.

## **DRESSAGE CLASSES:**

1. USEA Dressage – Test of Choice
2. USDF/ USEF – Test of Choice
3. Quadrille – Test of Choice (USDF Tests & CD if applicable)
7. Western Dressage – Test of Choice
8. Pas de Deux – English & Western. Open. Max time 8 min. Submit pattern w/entry & CD if applicable.
10. Musical Freestyle. (Submit pattern & CD with entry)

Links to Tests:

[WDAA Tests - Valid From 2017 Until Further Notice \\* Western Dressage Association of America](#)

[2019 US Dressage Tests Scoresheets | YourDressage.org](#)

[Dressage Tests - USEA, United States Eventing Association, Inc. \(R\) US National Combined Training, Horse Trials: Dressage, Cross Country, Show Jumping | United States Eventing Association® \(useventing.com\)](#)

**COVID RESTRICTIONS:** Must maintain 6 feet physical distancing at all times and wear a mask whenever 6 feet distancing is not possible. Sanitizers are available for all participants and crew members.

**SCHEDULE:** Start time is 9 am. Management reserves the right to cancel, combine, or split classes. Classes will be judged according to USEF and USDF rules where applicable.

**ENTRIES: Make checks payable to Shoreline Riders.** Mail Entries to Jeanette Jacobi, 33661 Simpson Rd, Fort Bragg, CA 95437 or deliver to Hwy 20 Feed, 31800 Hwy 20, Fort Bragg on or before close date. Mailed entries MUST be postmarked 3 days prior to close of entry. **Entries close on April 17th, 2021.** Entries are on a first-come, first-serve basis. Post entries will be accepted only as space allows. For questions call or text: 650-224-1922. Email: [jjacobi@pacbell.net](mailto:jjacobi@pacbell.net). No refunds unless veterinarian's/doctor's certificate is supplied.

**FEES:** \$75 per dressage test \$40 per rider for Quadrille and/or Pas de Deux.

**TIMES:** Times will be emailed by Friday before clinic. It is the responsibility of the rider to contact show management if times are not received by Friday 4pm prior to Clinic. 650 224-1922 (text is best) Please arrive at least 30 minutes prior to your ride time to allow sign in and warm up time.

**HORSES:** All horses must have up-to-date vaccinations. Braiding is not required but is appreciated. Please clean up after your horse; dispose of manure in appropriate containers. Horse must be under rider's control at all times.

**RIDERS:** Regulation show attire is not required but is appreciated. Helmets and boots with heels ARE required for all riders. Western hats allowed for Western Riders only.

**TRAILER PARKING:** Please park trailers ONLY in designated areas. Maintain a safe distance from other trailers and horses at all times.

**VISITORS:** Due to current County COVID restrictions for Red Tier auditors/spectators are not allowed

**DOGS AND CHILDREN:** Please leave pets at home. Children must be supervised by an adult at all times.

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## SHORELINE RIDERS

**Sunday, April 25<sup>th</sup>, 2021**  
**Rides Start at 9 a.m. ~ Entries Close April 17, 2021**

Judge: Gail McGuffey  
 Manager: Jeanette Jacobi

Rider Name \_\_\_\_\_ Age (if minor) \_\_\_\_\_

Address \_\_\_\_\_ City/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Horse Name \_\_\_\_\_ Gender \_\_\_\_\_ Age \_\_\_\_\_

CLASS #	LEVEL	TEST#	HORSE	FEE
Example 7	Training	1	Mister K	\$75

**TOTAL FEES:** \_\_\_\_\_

### Assumption of Risk, Waiver, and Indemnification - All riders must complete this form.

Name of person entered in horse and non-horse related activities: \_\_\_\_\_

I agree in consideration for participation in this equine competition to the following:

- That I choose to participate voluntarily in this Equine Competition as a rider, lessee, owner, agent, coach, trainer, or as a 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 ("Harm").
- To release Shoreline Riders, Pacific Sport Horse Training LLC from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm caused by me or my horse to others, even if the Harm resulted, directly or indirectly, from the negligence of people or persons connected to this Competition.
- To expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of any agents of Shoreline Riders and Pacific Sport Horse Training LLC .
- To indemnify (that is to pay any losses, damages, or costs incurred by Shoreline Riders and Pacific Sport Horse Training LLC 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 at the Competition.
- That I understand that I am entitled to wear protective equipment without penalty and I acknowledge that I am hereby strongly encouraged to do so while WARNING that no protective equipment can guard against all injuries.
- If I am a parent or guardian of a junior competitor, 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.
- That Shoreline Riders and Pacific Sport Horse Training LLC, as used above includes all of their officials, officers, directors, employees, agents, personnel, volunteers, and affiliated organizations.

I represent that I have the requisite training, coaching and abilities to safely compete in this Competition Clinic. By signing below, I agree to be bound by all applicable rules and all terms and provision of this entry form.

Signature of Rider or, if minor, parent or guardian \_\_\_\_\_ Date \_\_\_\_\_

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