

Dressage and  
Jumping

# NSC Schooling Show

Ride a Test & Clear Rounds event

October 2 - 3<sup>rd</sup> 2021

Fair Grounds, Smithers BC



**Dressage Judge:** Lisa Hamer   **Course Designer:** Jane Lloyd-Smith   **Show Manager:** Demetra Kinsey

## General Information:

This event will follow current PHO **outdoor gathering guidelines**. (Spectators allowed )  
(<https://www2.gov.bc.ca/gov/content/covid-19/info/restrictions#pho-order> )

All persons on the grounds must adhere to all NSC Covid-19 rules listed on the end of Barn C including keeping a distance of 2m from each other at all times. Everyone attending the event (riders, parents, coaches, volunteers) must complete a covid self-assessment form upon arrival. BC COVID-19 Self-Assessment Tool Link: <https://bc.thrive.health/covid19/en>

## Show Information:

**Entries close: Sept. 29<sup>th</sup> at Midnight!**

Show will use HCBC rules unless otherwise listed.

- Show Management reserves the right to combine, add or remove classes or divisions or adjust prizes.
- Stabling at \$15/night (\$10 for NSC Members) (shavings free on site). Clean stall deposit is \$25.00 on a separate cheque or cash.
- Washrooms are on site, no showers.
- Refunds will not be issued without a Vet or Doctor's note.
- Questions: Demetra at 403-966-0226 or [demetrav@hotmail.com](mailto:demetrav@hotmail.com)
- Post entries will only be accepted with an additional \$20.00 fee per horse/rider combo & if our max numbers allow.
- Riders may ride up to three (3) dressage tests and may enter two (2) jumper divisions but they must be consecutive for each horse entered
- Ribbons: Ribbons will not be provided at this schooling show.
- Class Fees – see entry form.

## Class Description:

- **TABLE A JUMPER:** Faults are penalized by points, and the rounds are against the clock. In the event of a tie for first, there will be a jump off, other placings are taken based on time in the first round.
- **DRESSAGE:** Riders may ride up to 3 consecutive tests (per horse). You must provide your own reader.

Please note that the NSC may host separate events in designated areas per discipline.



## Saturday Classes

<b>SATURDAY 9:00AM</b>	<b>Class</b>	
<b>ENGLISH DRESSAGE</b>	1	EC INTRODUCTORY TEST B (W/T)
	2	EC INTRODUCTORY TEST C (W/T/C)
	3	EC TRAINING LEVEL 2
	4	EC TRAINING LEVEL 3
<b>WESTERN DRESSAGE</b>	5	HCBC Western Dressage Walk/Jog Test 2
	6	HCBC Western Dressage Walk/Jog Test 3
	7	HCBC Western Dressage Training Level Test 2
	8	HCBC Western Dressage Training Level Test 3
	9	HCBC Western Dressage First Level Test 2
	10	HCBC Western Dressage First Level Test 3
<b>ENGLISH DRESSAGE</b>	11	EC FIRST LEVEL 2
	12	EC FIRST LEVEL 3
	13	EC SECOND LEVEL 2
	14	EC SECOND LEVEL 3
	15	EC THIRD LEVEL 2
	16	EC THIRD LEVEL 3

## Sunday Classes

<b>SUNDAY 9:00 AM</b>	<b>Class</b>	<b>JUMPER</b>
Jumper Division 1	17	18" X RAIL Welcome Jumper
	18	18" X Rail Open Jumper
Jumper Division 2	19	2'0" Welcome Jumper
	20	2'0" Open Jumper
Jumper Division 3	21	2'3" Welcome Jumper
	22	2'3" Open Jumper
Jumper Division 4	23	2'6" Welcome Jumper
	24	2'6" Open Jumper
Jumper Division 5	25	2'9" Welcome Jumper
	26	2'9" Open Jumper
Jumper Division 6	27	3'0" Welcome Jumper
	28	3'0" Open Jumper
Jumper Division 7	29	3'3" Welcome Jumper
	30	3'3" Open Jumper

# NSC October Schooling Show - Entry Form (one / horse)

Name of Rider: \_\_\_\_\_ HCBC #: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_ Jr Rider Age: (M/D/Y) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home Ph: \_\_\_\_\_ Cell Ph: \_\_\_\_\_

Name of Horse: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_

Owner of Horse: \_\_\_\_\_ Signature of Horse Owner: \_\_\_\_\_

Coach's Name: \_\_\_\_\_

If you have more than one horse to ride – please fill out a form for each horse.

**Jumper divisions.** Riders may enter 2 jumper divisions but they must be consecutive for each horse entered

<b>Dressage Tests</b> class(s) _____, _____, _____	(max 3): _____ x	\$15/test	\$
<b>Jumper Classes</b> division(s) _____	(2 classes/div) _____ x	\$20/Div	\$
Jump Course Setup Fee (to be refunded if you help take the course down after)		\$10	\$
Stabling dates (nights of): _____	(non NSC members)	\$15/night	\$
Stabling dates (nights of): _____	(NSC members)	\$10/night	\$
<b>Stabling Deposit</b> Once stall is proven clean to a show committee member, the separate deposit cheque will be returned. (Payable to Northern Saddle Club)		\$25	\$
<b>Electric Power hook up for Camping:</b> (Based on availability – First come first serve) Regular camping is free if you are attending the event		\$20	\$
<b>TOTAL :</b>		<b>\$</b>	

**Payment Method Paid by (circle one):**      Cheque      Cash      Etransfer

Entries and etransfers (preferred) can be emailed to [demetrav@hotmail.com](mailto:demetrav@hotmail.com) .

If paying by cheque, please make it out to Northern Saddle Club and mail it to NSC, Box 431, Smithers, BC V0J 2N0.

## Acceptance of Risk:

I have read and fully understand the Northern Saddle Club (NSC) show rules and agree to be bound. I agree to make no claims against the NSC, its volunteers, officials or paid staff should any damage be occasioned to, or loss occur to any animal or equipment, or any accident or injury occur to any person while stabling or using the facilities. I agree to be held responsible for any damage done by myself, my horse or my agents to the barns or NSC property. I acknowledge that equine activities are a dangerous and a life threatening sport and accept this responsibility and risk.

**Rider's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian Signature of Jr. Rider** \_\_\_\_\_

# Event Participation Waiver

## Northern Saddle Club the "Organizer"

### 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: NSC Dressage Test Rides (the "Event"). This waiver does not affect accident and out-of-country travel insurance provided by the Organization where applicable.

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. Has not visited a COVID-19 high risk area, region or location in Canada during the last 14 days;
3. Does not knowingly have COVID-19;
4. 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;
5. 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
6. 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 man-made 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.

**Print Name:** \_\_\_\_\_  
the "**Participant**"

**Date of Birth:** \_\_\_\_\_  
(mm/dd/yyyy)

**Print Name:** \_\_\_\_\_  
The "**Guardian**" (if Participant is a minor)

**Signature:** \_\_\_\_\_  
Participant or Guardian for minor

**Date:** \_\_\_\_\_  
(mm/dd/yyyy)