

# VDRC

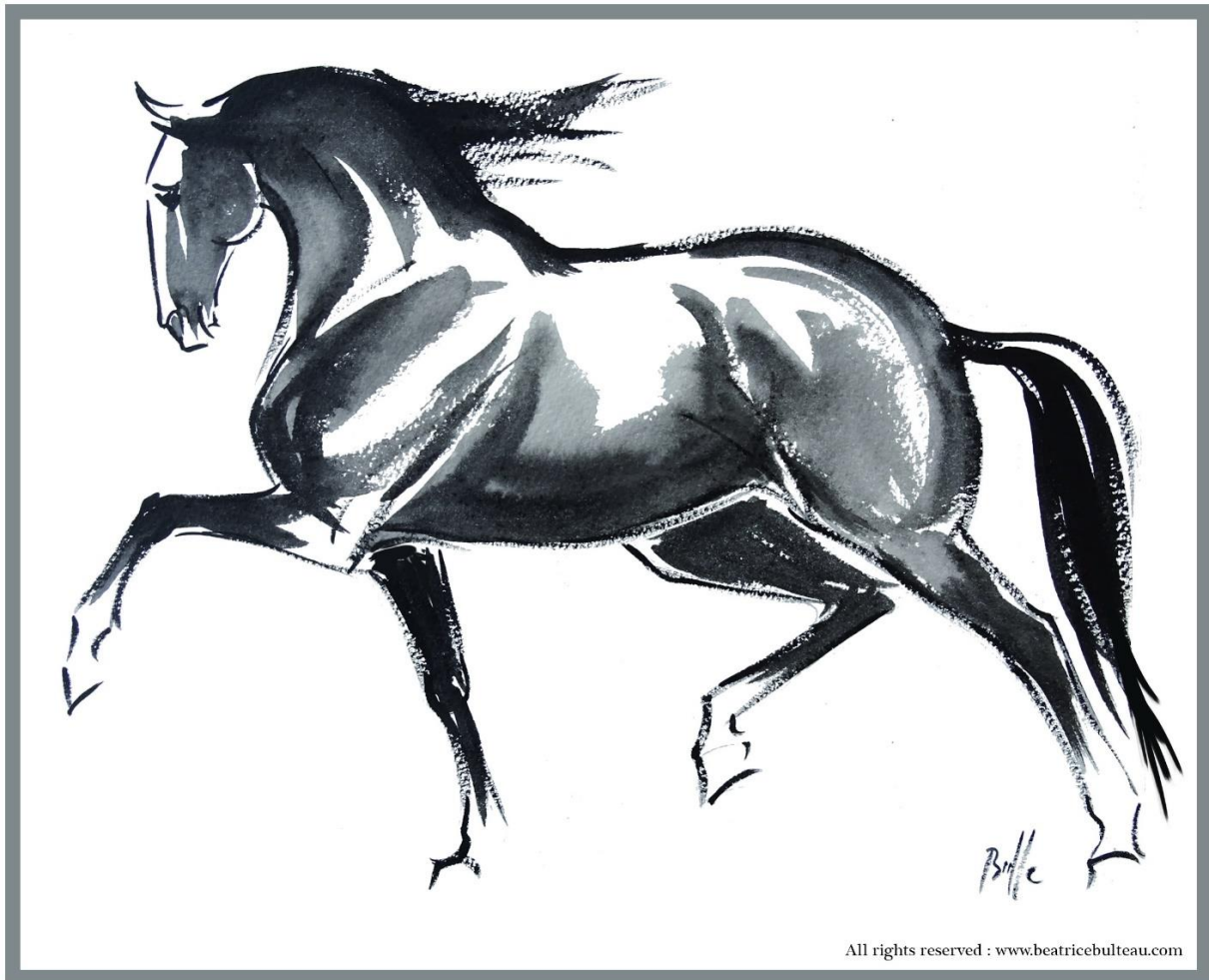
## *Dressage Schooling and Percent Days*

Two Judges - Two Rings – In a Competition Atmosphere

Lynda Ramsay - EC High Performance 1, FEI Judge, EC Sr Basic Dressage Judge

Joni Lynn Peters – EC High Performance 1, Elite Rider

Monique Hubs Michel - EC Sr Basic Dressage Judge



[WWW.VERNONDISTRICTRIDINGCLUB.COM](http://WWW.VERNONDISTRICTRIDINGCLUB.COM)

Fabulous Draw Prizes Sponsored by Rider's Tack



## *Dressage Schooling and Percent Days*

VDRRC Welcomes you to our ever-changing Dressage Event!

### **'VDRRC TEST FEST'**

This is not a competition, but a chance to get out in an encouraging show atmosphere. You will compete against yourself to raise percentages with instant feedback. Scores will be posted.

Choose your tests from current EC Dressage, Event, Working Equitation and Western Equitation tests.

#### **SATURDAY, JULY 3:**

- Sessions on Saturday with Joni Lyn Peters will be 12 minutes to allow for discussion and improvement of test movements. All tests will be scored.
- Saturday rides with Monique Hubs Michel will be judged with a quick comment.

#### **SUNDAY, JULY 4:**

- Sessions on Sunday with Lynda Ramsay and Monique Hubs Michel will be ridden as in a show - for percentages. Results will be posted.

**PRIZE DRAWS WILL BE HELD AT EACH LEVEL ON SUNDAY FOR RIDERS COMPETING BOTH DAYS**

**\*Amazing prizes sponsored by Rider's Tack**

**Rider's**  
Tack.Apparel.Supply



## VDRC Dressage Schooling and Percent Days Saturday & Sunday – July 3 – 4, 2021

Horse Name			
Rider Name		HCBC #	VDRC Member? yes      no
Address		City	Province      Postal Code
Phone		Email	
Birthdate (if under 19 years)			

Day	Test Level & Number (EC, Eventing, Western Dressage, and Working Equitation Tests Available)	Judge (Pick ONE Per Test)	Preferred Time	Fees
Saturday		<input type="checkbox"/> Test & Feedback with Joni Lynn Peters <i>Members: \$35.00; Non-Members: \$40.00</i> <input type="checkbox"/> Test & Comments with Monique Hubs Michel <i>Members: \$30.00; Non-Members: \$35.00</i>		
Saturday		<input type="checkbox"/> Test & Feedback with Joni Lynn Peters <i>Members: \$35.00; Non-Members: \$40.00</i> <input type="checkbox"/> Test & Comments with Monique Hubs Michel <i>Members: \$30.00; Non-Members: \$35.00</i>		
Saturday		<input type="checkbox"/> Test & Feedback with Joni Lynn Peters <i>Members: \$35.00; Non-Members: \$40.00</i> <input type="checkbox"/> Test & Comments with Monique Hubs Michel <i>Members: \$30.00; Non-Members: \$35.00</i>		
Sunday		<input type="checkbox"/> Test & Comments with Lynda Ramsay <input type="checkbox"/> Test & Comments with Monique Hubs Michel <i>Members: \$30.00; Non-Members: \$35.00</i>		
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<b>Stabling Request:</b> <input type="checkbox"/> Stall / Covered Pen, Shavings Included <i>Members: \$25.00 / night</i> <i>Non-Members: \$30.00 / night</i>  <b>\$40.00 Stall Cleaning Deposit Required.</b> <i>Please include a separate cheque for stall cleaning. If you choose to clean your stall, see the entry desk to get your cheque back, or walk away and let Vernon Pony Club take care of your stall for your \$40.00 stall cleaning fee.</i>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border-bottom: 1px solid black;">Total Stabling Fees</td> <td style="width: 10%;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Stall Cleaning Deposit (\$40.00 if Applicable)</td> <td></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Administration Fee</td> <td style="text-align: right;">\$10.00</td> </tr> <tr> <td><b>TOTAL FEES</b> (VDRC Does Not Charge GST)</td> <td></td> </tr> </table>	Total Stabling Fees		Stall Cleaning Deposit (\$40.00 if Applicable)		Administration Fee	\$10.00	<b>TOTAL FEES</b> (VDRC Does Not Charge GST)	
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<b>TOTAL FEES</b> (VDRC Does Not Charge GST)									

No phone or fax entries. No post-dated cheques. NSF cheques pay \$30.00 penalty (cash only). **Entries Close June 28, 2021**  
**ENTRIES** by email to kc.jollymour@gmail.com, **PAYMENT** by e-transfer to info@vernondistrictridingclub.com, password: VERNON

**Enclose the Following:**

<input type="checkbox"/> Registration Form	<input type="checkbox"/> Proof of HCBC 2021 Membership	<input type="checkbox"/> Payment	<input type="checkbox"/> Stall Cleaning Deposit (if Applicable)	<input type="checkbox"/> Signed, Dated Liability Waiver
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**COVID-19 PROTOCOLS**  
 We are held to a strict 50 person on premises limit. All rides will be pre-scheduled and strictly monitored.  
 Sign a COVID-19 release at the office upon arrival.



**ACKNOWLEDGMENT OF RISK AND RELEASE OF LIABILITY (AR-0103)**

**For Participants Over the Age of Majority in the Province or Territory in which the Equine Activities are Provided by the Host WARNING: THIS AGREEMENT WILL AFFECT YOUR LEGAL RIGHTS. READ IT CAREFULLY!**

**Every Person Must Read and Understand this Waiver Before Participating in Equine Activities**

The following waiver of all claims, release from all liability, assumption of all risks, agreement not to sue and other terms of this agreement are entered into by me (the Participant) with and for the benefit of the Vernon District Riding Club, its directors, officers, employees, volunteers, business operators, agents and site property owners or lessees (collectively the "Host"). Without limiting the generality of the foregoing, "Equine Activities" includes but is not limited to trail rides, pack trips and riding instructions provided by the "Host" to the Participant. Initial Each Item below after Reading and Understanding each item:

- \_\_\_\_1. I am aware that there are inherent dangers, hazards and risks (collectively "Risks") associated with "Equine Activities" and injuries resulting from these "Risks" are a common occurrence. I am aware that the "Risks" of "Equine Activities" mean those dangerous conditions which are an integral part of "Equine Activities", including but not limited to: (a) the propensity of any equine to behave in ways that may result in injury, harm or death to persons on or around them and to potentially collide with, bite or kick other animals, people or objects; (b) the unpredictability of an equine's reaction to such things as sounds, sudden movement, tremors, vibrations, unfamiliar objects, persons or other animals and hazards such as subsurface objects; (c) the potential for other participants to behave in a negligent manner that may contribute to injury to themselves or others, including failing to act within their abilities to maintain control over an equine.
- \_\_\_\_2. I freely accept and fully assume all responsibility for all "Risks" and possibilities of personal injury, death, property damage or loss resulting from my participation in "Equine Activities".
- \_\_\_\_3. I agree that although the "Host" has taken steps to reduce the "Risks" and increase the safety of the "Equine Activities", it is not possible for the "Host" to make the "Equine Activities" completely safe. I accept these "Risks" and agree to the terms of this waiver even if the "Host" is found to be negligent or in breach of any duty of care or any obligation to me in my participation in "Equine Activities".
- \_\_\_\_4. In addition to consideration given to the "Host" for my participation in "Equine Activities", I and my heirs, next of kin, executors, administrators and assigns (collectively my "Legal Representatives") agree: (a) to waive all claims that I have or may have in the future against the "Host"; (b) to release and forever discharge the "Host" from all liability for any personal injury, death, property damage, or loss resulting from my participation in the equine activity due to any cause, including but not limited to negligence (failure to use such care as a reasonably prudent and careful person would use under similar circumstances), breach of any duty imposed by law, breach of contract or mistake or error in judgment of the "Host"; and (c) to be liable for and to hold harmless and indemnify the "Host" from all actions, proceedings, claims, damages, costs demands, including court costs and costs on a solicitor and own client basis, and liabilities of whatsoever nature or kind arising out of or in any way connected with my participation in "Equine Activities".
- \_\_\_\_5. I agree that this waiver and all terms contained herein are governed exclusively and in all respects by the laws of the Province or Territory of Canada in which the "Equine Activities" are provided by the "Host". I hereby irrevocably submit to the exclusive jurisdiction of the courts of that Province or Territory of Canada and I agree that no other court can exercise jurisdiction over the terms and claims referred to herein. Any litigation to enforce this waiver will be instituted in the Province or Territory of Canada in which the "Equine Activities" are provided by the "Host".
- \_\_\_\_6. I confirm that I have had sufficient time to read and understand this waiver in its entirety. I understand that this agreement represents the entire agreement between myself and the "Host", and it is binding on myself and my "Legal Representatives".
- \_\_\_\_7. I confirm that I have reached the age of majority in the province in which I am participating in "Equine Activities".

**Please Print Clearly**

Print Participant Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Signed this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_

Signature of Participant: \_\_\_\_\_

Print Name of Witness to Signing and Initialing) \_\_\_\_\_

Signed this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_

Signature of Witness: \_\_\_\_\_



**ACKNOWLEDGMENT OF RISK AND RELEASE OF LIABILITY (AR-0103)**

**For Participants Under the Age of Majority in the Province or Territory in which the Equine Activities are Provided by the Host**

**WARNING: THIS AGREEMENT WILL AFFECT YOUR LEGAL RIGHTS. READ IT CAREFULLY!**

The Parent/Guardian Must Read and Understand this Waiver Prior to Infant Participating in Equine Activities The following waiver of all claims, release from all liability, assumption of all risks, agreement not to sue and other terms of this agreement are entered into by me on behalf of the Infant Participant named below with and for the benefit of the Vernon District Riding Club, its directors, officers, employees, volunteers, business operators, agents, and site property owners or lessees (the "Host"). Without limiting the generality of the foregoing, "Equine Activities" includes but is not limited to trail rides, pack trips or riding instruction provided by the "Host" to the Infant Participant. Initial Each Item below after Reading and Understanding each item:

\_\_\_\_\_ 1. I am the Parent/Guardian of the Infant Participant and am executing this waiver on behalf of the Infant Participant in my capacity as Parent/Guardian and with the intent that his waiver be binding on myself and the Infant Participant for all legal purposes.

\_\_\_\_\_ 2. I am aware that there are inherent dangers, hazards and risks ("Risks") associated with "Equine Activities" and injuries resulting from these "Risks" are a common occurrence. I am aware that the "Risks" of "Equine Activities" mean those dangerous conditions which are an integral part of "Equine Activities", including but not limited to: (a) the propensity of any equine to behave in ways that may result in injury, harm or death to persons on or around them and to potentially collide with, bite or kick other animals, people or objects; (b) the unpredictability of an equine's reaction to such things as sounds, sudden movement, tremors, vibrations, unfamiliar objects, persons or other animals and hazards such as subsurface objects; and (c) the potential for other participants to behave in a negligent manner that may contribute to injury to themselves or others, including failing to act within their abilities to maintain control over an equine.

\_\_\_\_\_ 3. I freely accept and fully assume all responsibility for all "Risks" and possibilities of any and all personal injury, death, property damage or loss resulting from the Infant Participant's participation in "Equine Activities". \_\_\_\_\_ 4. I agree that although the "Host" has taken steps to reduce the "Risks" and increase the safety of the "Equine Activities", it is not possible for the "Host" to make the "Equine Activities" completely safe. I accept these "Risks" and agree to the terms of this waiver on behalf of the Infant Participant, even if the "Host" is found to be negligent or in breach of any duty of care or any obligation to myself or the Infant Participant in the Infant's participation in "Equine Activities".

\_\_\_\_\_ 5. In addition to consideration given to the "Host" for the Infant Participant's participation in "Equine Activities", I and my heirs, next of kin, executors, administrators and assigns, as well as the Infant Participant and his/her heirs, next of kin, executors, administrators and assigns (collectively our "Legal Representatives") agree: (a) to waive all claims that the Infant Participant has or may have in the future against the "Host"; (b) to release and forever discharge the "Host" from all liability for personal injury, death, property damage, or loss that I, the Infant Participant, or our "Legal Representatives" might suffer as a result of the Infant Participant's participation in "Equine Activities" due to any cause, including but not limited to negligence (failure to use such care as a reasonably prudent and careful person would use under similar circumstances), breach of any duty imposed by law, breach of contract or mistake or error in judgment of the "Host"; and (c) to be liable for and to hold harmless and indemnify the "Host" from all actions, proceedings, claims, damages, costs demands, including court costs and costs on a solicitor and own client basis, and liabilities of whatsoever nature or kind arising out of or in any way connected with the Infant's participation in "Equine Activities".

\_\_\_\_\_ 6. I agree that this waiver and all terms contained herein are governed exclusively and in all respects by the laws of the Province or Territory of Canada in which the "Equine Activities" are provided by the "Host". I hereby irrevocably submit to the exclusive jurisdiction of the courts of that Province or Territory of Canada and I agree that no other court can exercise jurisdiction over the terms and claims referred to herein. Any litigation to enforce this waiver will be instituted in the Province or Territory of Canada in which the "Equine Activities" are provided by the "Host".

\_\_\_\_\_ 7. I confirm that I have had sufficient time to read and understand this waiver in its entirety. I understand that this agreement represents the entire agreement between the "Host", myself as Parent/Guardian, and the Infant Participant, and it is binding on myself, the Infant Participant and our "Legal Representatives".

**Please Print Clearly**

Infant Participant's Name \_\_\_\_\_ DOB \_\_\_\_\_ day/mth/yr

Address \_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Print Parent/Guardian Name \_\_\_\_\_

DOB \_\_\_\_\_ day/mth/yr

Phone (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Signature of Parent/Guardian of Infant Participant \_\_\_\_\_

Print Name of Witness to Signing and Initialing \_\_\_\_\_

(Signature of Witness) \_\_\_\_\_