Caille Farms Riding Stable Schooling Show Dressage Schooling Show Schedule 2023 February 5th 2023 & March 5th 2023

CLASS LIST:

- 1. Intro Level Test of Choice Tests A, B & C
- 2. Training Level Test of Choice Tests 1, 2, & 3
- 3. First Level Test of Choice Tests 1, 2 & 3
- 4. Second Level & above Test of Choice all tests
- 5. Western Dressage Test of Choice all tests **

CLASS RULES:

- A. You may ride as many tests in a class as you wish and you may ride the same test more than once.
- B. Horse/Rider Combinations are not restricted to consecutive levels.
- C. Classes will be placed on percentage scores plus bonus points for higher tests (i.e. an actual score of 60% in Training Level test 3 will place above an actual score of 60% in Training Level test 1).
- D. Classes may be split if entries warrant.
- ** Western Dressage will be judged based on Classic Dressage principals.

ASTM/SEI hard hats are required.

SHOW INFO:

Indoor ring will be open for mounted warm-up one hour prior to start time.

Ride times will be available Thursday night/Friday morning before the show.

Tests will be scheduled in barn/trailer groups and not in order of level. Scored tests will be available to riders as soon as they are scored. Classes (see list) will be placed by end of the show. Results will be emailed. Ribbons will be mailed for a postage fee. Warm-up and lunch breaks will be scheduled between tests as deemed necessary.

Day stalls are limited and are available for use 1 & 1/2 hours prior to the start time of the show. [MAKE STALL RESERVATIONS BY PHONE ONLY-612-418-2998-Cherie] You may lunge and ride in the outdoor all day, weather permitting. ABSOLUTELY NO LUNGING IN THE INDOOR RING WHILE OTHERS ARE RIDING.

Office Fee: \$20.00 per Horse/Rider Combination

Entry Fee: \$25.00 per Test Stall Fee: \$20.00 per Stall

ENTRIES MUST INCLUDE (1) PROOF OF NEGATIVE COGGINS ISSUED WITHIN 12 MONTHS.

Please specify which show you will be attending on your entry form.

Entries MUST be mailed to arrive the Saturday before the show, or emailed the Monday before the show. Payment must be received with entry. Cash, Check, Venmo or Credit Card accepted.

Venmo: @manningfab
For credit card please add 4% to total sent to cover processing fees.
For credit card payments call Cherie @612-418-2998
Cash or Check:

Caille Farm

9209 Iffert Ave NE, Monticello , MN 55362 barb@happyanimalbedding.com or manningfab@gmail.com Barb-612-598-1696/Cherie-612-418-2998

Caille Farm Riding Stable 2023 Dressage Schooling Show Entry Form

| | Date of Show: | | |
|--|--|---|-------------|
| ASTM/SEI ap | proved helmet required while riding on (| Caille Farm Riding Stable property. | |
| | ONLY ONE HORSE/RIDER COMBINATION | ON PER ENTRY FORM | |
| | | | |
| Tests: | | | |
| PARTICIPATION/OFFICE FEE: CLASS FEES: \$25 per test STALL FEES: \$20 per stall TOTAL FEES: | \$ 20. | | |
| In consideration of and as a cond and their respective employees, understand that equine events a accident, loss and serious bodily | contractors, agents, volunteers, and each of nd activities like the Caille Farms Riding Stabl injury, to me or to other persons including, b | ation chool show operated by Caille Farm Riding Stable, Barb Wh f their respective successors, I agree as follows: • I know a ble Schooling Show involve inherent dangerous risks of but not limited to, broken bones, head injuries, trauma, pa es, including injuries, colic, disease, and loss of use (collecti | and ain, |
| HARM due to the negligence of of incurred by Caille Farm Riding St my invited quests, my contracto represent that I have the requisi Riding Stable Schooling Show. • | Caille Farm Riding Stable. • I shall indemnify a table as a result of any damages or HARM cau rs or employees or by any equine I bring to tl te knowledge, experience, training, coaching | rom any and all HARM, including, but not limited to, and agree to pay any losses, damages, or costs aused to a third party by me, my spouse or children, the Caille Farm Riding Stable Schooling Show. • I ag and ability to safely compete in this Caille Farm bitor, I consent to the minor exhibitor's participation of the minor exhibitor. | |
| RIDER NAME: | | | |
| SIGNATURE:(PARENT/GUARDIAN for RIDER unde | er 18 years) | Date: | |
| | | Date: | |
| (If different from rider) | | | |

Caille Farm Riding Stable

PHONE: _____E-MAIL: _____

ADDRESS: _____

(RIDER or PARENT/GUARDIAN)

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