



# 2021 Camelot Dressage Shows

Show Date: May 16, 2021 ■ September 12, 2021

Camelot Equestrian Park ■ 1985 Clark Road ■ Butte Valley, CA 95965

**Judges:** Kalli Bowles—May 16, 2021  
tba—September 12, 2021

**Judging and Dress to comply with USEF Rules**

**Show Time:** 8:00 A.M. to 5:30 P.M.

**Ride Times:**

Available after closing date at:

<https://camelotequestrianpark.com/dressage.htm>

(link to [www.startboxscoring.com](http://www.startboxscoring.com))

Ride times will not be mailed.

**Closing Dates 10 DAYS PRIOR TO SHOW DATE:**

Entries/Fees must be **RECEIVED** no later than 10 days prior to show date. Late entries may be accepted if undersubscribed; late fee of \$10 must accompany late entry.

May 16 Show closes **May 6, 2021** at 5:00 P.M.

Sept 12 Show closes **Sept 2, 2021** at 5:00 P.M.

**Fees:**

**\$30.00/class**, maximum two classes per horse, no class maximum per rider. **\$17.00 Drug/Office fee** per entry. Western Dressage CAWDA High Point Fee **\$3.00**. Late, incomplete, or Entries without payment \$10 fee. (Make sure to include DOB and designate Am/Jr/O status.) Refunds if with-drawn before closing date.

**NO REFUNDS AFTER CLOSING DATE.**

Camping and Stabling available on grounds with access to the 1,600 acres of Camelot. \$25.00 per night per box stall, \$20.00 per night pipe stall, \$20.00 per day schooling. **No schooling fee due on Show day for horses entered in Show!**

**Class List (Specify Tests of Choice on Entry):**

- 2019 USDF Intro Test A, B and C
- 2019 USEF Training through Fourth Levels FEI
- Western Dressage Intro through Level 3
- Eventing

2019 USDF Intro Tests, Intro and Basic Western Dressage Tests, and BN thru Prelim Eventing Tests will be held in 20m x 40m Court. All other Tests will be in Standard 20m x 60m Court.

**Awards:**

Ribbons through 5th Place

Prizes for 1st Place in each class  
(Minimum of 3 entries per class)

Prize for High Point of the day

**Fees can be paid online:**

<http://www.camelotequestrianpark.com/dressage.html>

**Make sure you email or snail mail the filled out entry to Terrie so that it is received by the closing date.**

Email: [terriedouglas24@gmail.com](mailto:terriedouglas24@gmail.com)

Snail Mail: P.O. Box 66 Vina, CA 96092-0066

**Questions?**

Call Terrie Douglas 530-342-3577  
(or 408-569-9305 on show day.)

Dogs are welcome at Camelot but must be leashed during Show.

# Entry Form

## 2021 Camelot Dressage Show Series

**Show Organizer:** Terrie Douglas 530-342-3577 or (408-569-9305 Day of Show)

**Email or Snail Mail Completed Entries and Signed Release Form to:** terriedouglas24@gmail.com or

**Terrie Douglas P.O. Box 66 Vina, CA 96092-0066**

**Date of Show:**  May 1  Sept 12 (Check appropriate box)

### Rider Information

Name:
Address:
City:
State: Zip:
Phone: Cell:
Email:
DOB _____ <input type="checkbox"/> Amateur <input type="checkbox"/> Junior/YR <input type="checkbox"/> Open (Check appropriate box)

### Horse Information

Name:
Breed:
Sex: Age:
Color:
<b>One rider/one horse pair per Show entry. Use separate Entry Form for multiple horses.</b>

### Horse Owner Information Check here if same as Rider.

Name:
Address:
City:
State: Zip:
Phone: Cell:
Email:

### Trainer/Guardian (Responsible for horse) Check here if same as Rider.

Name:
Address:
City:
State: Zip:
Phone: Cell:
Email:

**Emergency Contact Name and Phone:** \_\_\_\_\_

**Stable with:** \_\_\_\_\_

**Specify Class(es) of Choice** English  Western  (Check appropriate box)

Level/Test #	Class Description

### Fees

Total Class Fees	Specify # of classes:	x \$30 =	
CAWDA High Point Fee to Participate (optional)	(Western Only) add \$3.00		
Drug/Office Fee	<b>Mandatory for Show Participants Only</b>		\$17.00
Late Fee (\$10)			
Overnight Box Stall	Specify # of stalls:	x \$25 x # of nights =	
Overnight 12 x 24 Pipe Stalls	Specify # of stalls:	x \$20 x # of nights =	
Shavings	Specify # of bags:	x \$10 =	
Grounds fee (non show/clinic day and/or additional horses)	Specify # of horses:	x \$20 x # of days =	
<b>Sponsor Class(es)</b>	Specify # of Classes sponsored:	x \$25 =	
<b>Tax Deductible Contribution to CEPF</b>	Specify Amount you wish to Donate		
<b>Total Fees Enclosed with this Entry (Make Checks payable to CEPF)</b>			

**Don't Forget to Include  
Your Signed Release!**



# Participant Hold Harmless Agreement

Name \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_

THE UNDERSIGNED STATES AS FOLLOWS:

(A parent or legal guardian must sign if the participant is under the age of 18.)

I, The Participant, Parent or Legal Guardian of the participant acknowledge that competitive equine events contain inherent risks of personal injury, injury to supplies, and to equipment. Knowing these facts, I nevertheless, in consideration of your acceptance of this form, hereby for myself, my family members and/or legal wards, heirs, executors, and administrators in any way connected with the event, property, boarding, lessons, sales, or any other activity described herein, their representatives, heirs, executors, administrators, and assignees release, indemnify, and hold harmless Camelot Equestrian Park from any liability for damages or for any and all injuries that might be sustained by me, my family members and/or legal wards, including injuries to my employees and/or personal property or from any and all claims of any kind or nature that I, my family members and/or legal wards might have as a result of, or arising out of participation in any activity on the premises. Further, I hold harmless Camelot Equestrian Park for any sales, services, or representations for the duration of my stay upon the premises.

Further, I do hereby acknowledge that this release will extend to any accidents, damages, or claims arising out of my participation, caused by my own act, or anyone, or any animal within my control. I further agree that I will defend, indemnify, and hold harmless Camelot Equestrian Park, its owners, officers, directors, members and agents any and all of them against all claims, demands and causes of action including court costs and attorney fees directly or indirectly arising from any action or other proceeding brought by or prosecuted for my benefit contrary to this release extended to all claims of every kind and nature whatsoever, whether known or unknown, and expressly waive any benefits I may have, Section 1542 of the California Civil Code relating to the release of unknown claims.

\_\_\_\_\_ I acknowledge that I, The Participant, Parent or Legal Guardian, will be responsible for any and all costs incurred by the  
*initial* participant or the participant's family members for injuries or property damage that I or my family may incur, and that I, the Participant, Parent or Legal Guardian, have accident medical insurance coverage in force for injuries that I or my family may incur.

\_\_\_\_\_ I acknowledge that I, The Participant, Parent or Legal Guardian, should purchase and wear ASTM-standard/SEI-certified  
*initial* equestrian helmets while participating in equine activities. I understand that the wearing of such headgear while participating in equine activities may reduce the severity of some of the participants head injuries in the event of a fall or other related accident.

\_\_\_\_\_ I acknowledge that I, The Participant, Parent or Legal Guardian, participate in this event totally at my own risk for injuries  
*initial* or property damage I or my family may incur and, I acknowledge that I, the Participant, Parent or Legal Guardian, et al, hereby release and hold harmless the sponsor, co-sponsors, their owners, their officers, directors, members, affiliated organizations and others acting on its behalf, from any claim, legal liability, legal action, or right of damages, for any accident which may occur to me or my equine animal. I also assume and accept full responsibility for any damages done by me or my equine animal.

**MINORS (UNDER 18) MUST HAVE THEIR PARENT OR LEGAL GUARDIAN SIGN THIS AGREEMENT.**

I do acknowledge that I have read the foregoing Agreement, and know, and understand, and agree to the content thereof.

Participant's Signature \_\_\_\_\_ Print name \_\_\_\_\_

I, the parent or legal guardian of \_\_\_\_\_, for and in consideration of my child or ward's participation at Camelot Equestrian Park, state that I have read, and understand, and agree to all the terms and conditions of this Agreement.

I further warrant that I have health and accident insurance on said minor.

Signature \_\_\_\_\_ Print name \_\_\_\_\_

Executed on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.