



SKYLARK EQUESTRIAN

Facility location: 20350 Marsh Creek Rd, Brentwood, CA 94513

December HT & CT Schooling Show 2021

SHOW DATE: DECEMBER 19, 2021

DRESSAGE JUDGE: CREEKY ROUTSON (S)

OPENING DATE: NOVEMBER 21, 2021

CLOSING DATE: DECEMBER 12, 2021

Manager: Alex Skylark, alexsky33@gmail.com, 925-595-6574

Secretary: Laurie Daniel, LDsonHorse@gmail.com, 510-672-3260

Mail Entries to: Laurie Daniel 1439 Bismarck Lane, Brentwood, CA 94513

Make checks payable to: Skylark Equestrian

Online entries at: EqEntries.com, payment with credit card online only at EqEntries

Emailed entries: Send to LDsonHorse@gmail.com with payment through Venmo.

Venmo payment to: @Ellen-Skylark. Emailed entries accepted when Venmo payment is confirmed.

All entries must be complete when submitted. See page 2 for entry requirements.

Ribbons to 5th place and Awards to 3rd.

Skylark Equestrian CT/HT December Schooling Show 2021

Show Information

- Dressage Tests: Eventing USEF Dressage and USDF Dressage tests will be used. All tests will be in 20 X 40 meter court.
 - Starter CT or HT– 2019 USDF Introductory Test. Choice of Test A or Test B
 - Intro & Beginner Novice CT or HT–2018 USEF Beginner Novice Eventing Test A
 - Novice CT or HT– 2018 USEF Novice Eventing Test A
 - Training CT or HT– 2018 USEF Training Eventing Test A
- Fences: Starter – 1.5', Intro – 2', Beg Novice – 2'7" to 2'9", Novice – 2'9" to 2'11", Training – 2'11" to 3'3".
- Refund Policy: Cancellations submitted prior to the closing date will be all fees less the \$30.00 office fee. Cancellations after the closing date will be refunded, provided the space can be filled from a wait list. Refund less \$30.00 office fee & stabling fees. Post entries not refundable.
- Entry Acceptance:
 - Entries must be complete and accompanied by payment, Skylark holdharmless, USEA Release and horse vaccination records to be accepted.
 - Entries must be RECEIVED by posted closing date.
- Stabling: Fill out stabling form and submit with show entry. Stabling is \$50 / night. Please bring your own water bucket. Shavings available for \$10/bale.
- Rain Policy: If show has to be cancelled due to rain or weather conditions, entries will be refunded , less the \$30 office fee.
- Dry camping: **Reservation required.** Stay on site in your living quarters, or camper. No hook-ups. No fee for dry camping, but reservations required on the entry.
- Schooling on Saturday:
 - Schooling in dressage court 9:00-3:00. The show jumping arena and XC course available from 10:00-2:00.
 - No fee to school on site on Saturday if stabled overnight. If not stabling, a \$50 haul in fee is required to school on Saturday.

Confirmation of entry will be sent from "Confirmation@FoxVillage.com". Please make sure you check your email for confirmation and respond to your confirmation as appropriate.

Jump courses for cross country and stadium will be available on Coursewalk.com prior to the show date. Email will go out with link to the courses.

Dressage times will be emailed out by Friday prior to the show.

If you have questions regarding your entry please email Laurie at LDsonHorse@gmail.com

SKYLARK COVID 19 GUIDELINES

These rules have been developed for the safety and well being of all those in attendance as well as the staff and volunteers. Strict adherence to these rules will be enforced. Those not adhering to these rules, as stated below, will be asked to leave the show grounds immediately.

We are happy to have you attend our show. We need to make you aware that some of us at Skylark have imuno compromised family and friends. As a consideration to those of us hosting the show we ask that you please follow our masking requirements. This is for your safety as well as the heath and safety of our friends and family. We thank you in advance for being a caring person and helping us to host a safe and fun event.

If you are vaccinated for COVID 19, please bring your proof of vaccination. (Card or picture of your card on your phone.) You will be given a wristband that will allow you to be mask free throughout the facility. Come to the show office (RV) Saturday or Sunday to get a wristband.

If you are NOT vaccinated, please keep a mask with you at all times so that you can mask-up when in the following situations: at the show office, at the scoring/awards area, in the concession & vendor areas, inside the main barn, OR at ANYTIME where you are not able to keep greater than 6 feet of distance between you and others.

We thank you for understanding and supporting our safety protocols. Spectators are allowed. Please make sure your guests know the COVID Guidelines and have mask with them for areas that require mask wearing.

Please read the following guidelines that apply to everyone on the show grounds.

1. Everyone is required to self-monitor their temperature prior to entering the show grounds. Anyone with a temperature of 99.5 or above is not permitted to enter the show grounds
2. Anyone who has been in contact with someone who has tested positive for COVID-19 within the last 10 days or is currently exhibiting COVID-19 symptoms may not enter the show grounds.
3. Practice proper social distancing at all times, even those that have been vaccinated. Pay particular attention to distancing in the stabling areas, trailer parking areas, test pickup & score board, and concession/vendor areas.
4. Please wash hands regularly and adhere to other sanitation practices.

We appreciate your participation and compliance with these additional show rules.

Thank you!



Skylark Equestrian HT & CT Schooling Show 2021 Series

Schooling Horse Trial & Combined Training - Entry Form (One horse/rider per form)

Show Date December 19, 2021

Rider Name: _____ USEA #: _____ Junior DOB: _____

Full Address: _____

Phone: _____ Email: _____

Horse Name: _____ Color: _____ USEA#: _____ Sex: _____ Height: _____

Trainer/Riding with: _____ Camping Reservation: _____

Emergency Contact/

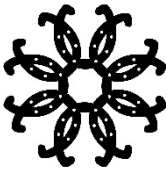
Name: _____ Phone#: _____ Relation: _____

Divisions (check one)

<input type="checkbox"/> Starter CT <input type="checkbox"/> Starter HT <input type="checkbox"/> Intro CT <input type="checkbox"/> Intro HT <input type="checkbox"/> Beg Novice CT <input type="checkbox"/> Beg Novice HT <input type="checkbox"/> Novice CT <input type="checkbox"/> Novice HT <input type="checkbox"/> Training CT <input type="checkbox"/> Training HT	Starter Entrants: Choose either USDF Intro Test A or Test B Write your selected dressage test here: _____ CT \$125 HT \$145 CT=Dressage and SJ HT=Dressage, XC and SJ	\$ \$ \$ \$ \$ \$ \$ \$ \$30.00 \$8.00 \$
Stall / Stable with: _____	\$50/Night	\$
Shavings	\$10 x bag	\$
Non-Competing Horse	\$50/Day	\$
Pre-Arrival Stall Prep (up to 3 bales of prepurchase shavings)	\$25	\$
Saturday – Dressage Test w/ Judge (20-minute sessions. Entry must be received by closing date.)	\$60/session	\$
Office Fee (required)	\$30	\$30.00
CDFA Fee (required)	\$8	\$8.00
Total Fees		\$

Make checks payable to: Skylark Equestrian OR Venmo @Ellen-Skylark with "Skylark Schooling Show" as reason.

Mail entries to: Laurie Daniel, 1439 Bismarck Lane, Brentwood, CA 94513



Skylark Equestrian
 Alex Skylark
 20350 Marsh Creek Road
 Brentwood, CA 94513

PARTICIPANTS HOLD HARMLESS AGREEMENT

THIS RELEASE CONTAINS IMPORTANT LIMITATIONS OF LEGAL LIABILITY - PLEASE READ

The undersigned states as follows:

I acknowledge that competitive and pleasure horse riding contains inherent risks of injury and/or death, including, but not limited to, damage to me personally, to my horse and to my equipment. Knowing these facts, I nevertheless, in consideration to you, in acceptance of this form, hereby for myself, my heirs, executors, assigns and administrators waive release, discharge and hold harmless ALEX SKYLARK and SKYLARK EQUESTRIAN and any and all directors, officers, employees and all individual members thereof and all other persons and organization in any way connected with the events, property, boarding, lessons or any other activity described herein, their representative heirs, executors, administrators and assigns from any and all right, claim or liability for damages or for any and all injuries that might be sustained by me including injuries to animals or property, or from any and all claims of any kind of nature that I might have as a result of, or arising out of my participation in any activity. Further, 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 the acts of anyone or any animal within my control. I further agree I will defend, indemnify, and hold harmless ALEX SKYLARK and SKYLARK EQUESTRIAN and any and all directors, officers, employees, members, and agents, or any of them against all claims, demands, and causes of action including court costs and attorney's 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 under applicable sections of the California Civil Code relating to the release of unknown claims.

ALL MOUNTED PERSONS MUST WEAR AN SEI/ASTM APPROVED HELMET

I do acknowledge I have read the foregoing paragraph and know and understand and agree to the content thereof.

NAME (print): _____ STREET: _____

CITY/STATE/ZIP: _____ PHONE: (h) _____ (c) _____

SIGNATURE: _____ DATE _____

MINORS MUST HAVE THE FOLLOWING LIABILITY SIGNED BY THEIR PARENT(S) OR LEGAL GUARDIANS.

We the undersigned parents and/or legal guardian of _____ for and in consideration of our child's/guardian's participation at SKYLARK EQUESTRIAN state that we have read the waiver, release and hold harmless agreement written above and we expressly agree that the terms and conditions of said waiver, release and hold harmless shall apply to and be binding upon us and our minor child/guardian in so far as it pertains to his or her participation and to any injury or damage said minor child or his or her horse may sustain or cause as a result of said participation. We further warrant we have health and accident insurance on said minor.

I declare under penalty of perjury that the foregoing is true and correct.

Executed this _____ day of _____, 20_____

PARENT/GUARDIAN (print name): _____ SIGNATURE: _____

ADDRESS: _____

PHONE Home: _____ Cell: _____

SKYLARK STABLING FORM



OFFICE USE ONLY

Event Name: _____ Date: _____

Rider Name: _____ Phone: _____

Stable with: _____

(Please use **one unique** name for your group. Show Management will do their best to match up individual names.)

Special needs/requests: _____

Please complete all sections below. Place check marks in appropriate box, indicating the nights stabling is needed.

Horse Name	Stallion/Mare/Gelding	Height	Dates Stabling Required	Mon	Tue	Wed	Thu	Fri	Sat	Sun

Approximate Time of Arrival: _____

Stalls \$ _____

Rider staying at: _____ Phone: _____

RV Hook-up _____

RV/Camper-No Hook-ups: Yes No Fee: \$0_ Number of RV spaces _____

Other \$ _____

Transport is: Small Trailer in feet _____ Large Trailer or Van in feet _____

TOTAL \$ _____

Make copies of this form as needed.

PAYMENT: Make payment to: Skylark Equestrian

Included with entry check. Separate check



USEA EDUCATIONAL ACTIVITIES AND SCHOOLING SHOWS RELEASE FORM

NAME OF ACTIVITY/SCHOOLING SHOW: _____ USEA AREA: _____

DATE(S) HELD: _____ LOCATION: _____ STATE: _____

I have applied to participate in this USEA sponsored educational activity. I agree that my participation is subject to the Conditions in this release and to those set by the organizer of this activity, the regulations and requirements of the USEA and, where applicable, the **U.S. Equestrian Federation Rules for Eventing**.

I agree to wear personal protective equipment when participating in this educational activity. When riding and handling equine, I agree to wear protective headgear passing or surpassing the ASTM/SEI standards with harness attached that meets standards currently imposed by the **U.S. Equestrian Rules for Eventing**. I understand that the USEA mandates that all riders participating in cross-country activity wear body-protecting vests that meet or exceed current USEF rules and the wearing of an approved medical armband or bracelet.

I understand that the sport of eventing is a high risk sport, and that my participation in this educational activity may also involve participation in an "equine activity" as defined by applicable laws and is solely at my own risk. I understand that my participation involves all inherent risks associated with the dangers and conditions which are an integral part of equine activities, including, but not limited to, the propensity of equines to behave in ways which may result in injury, harm or even death to humans or other animals around or near them; the unpredictability of equine reaction to sounds, sudden movements, smells and unfamiliar objects; persons or other animals; hazards related to surface and subsurface conditions; collisions with other equines or objects; sickness and disease (including communicable diseases); and, the potential of a participant to act in a negligent or unskilled manner which may contribute to injury to the participant or others, including failing or inability to maintain control over the animal. By participating in this activity **I agree** to assume responsibility for those risks, and **I release** and agree to hold harmless the activity organizer, organizing committee, officials, the USEA, USEF, their officers, agents, employees and the volunteers assisting in the conduct of this USEA educational activity and the owners of any property on which it is to be held, from all liability for negligence resulting in accidents, damage, injury or illness to myself and to my property, including the horse(s) which I may ride.

I understand and agree that the organizer of this USEA educational activity has the right to cancel this activity; to refuse any entry or application; to require and enforce the wearing of safety or other attire and the conduct of riders, horses and visitors; and to prohibit, stop or control any action during the activity deemed by the organizer to be improper or unsafe.

THIS FORM MUST BE FILLED OUT COMPLETELY AND SIGNED IF YOU WISH TO PARTICIPATE IN THIS ACTIVITY.

PARTICIPANT'S NAME (Please Print): _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ CELL PHONE: _____ EMERGENCY CONTACT PHONE: _____

FAX: _____ EMAIL: _____

TRAINER'S NAME (AT THIS EVENT): _____ PHONE: _____

NUMBER OF HORSES I WILL BE RIDING DURING ACTIVITY (if applicable): _____

Current Riding Level (if applicable):

Beginner Novice Novice Training Modified Preliminary Intermediate Advanced

Check appropriate box:

I am an active USEA member and my number is #: _____

I am not a USEA member.

I am not a USEA member. I wish to join and have enclosed my membership form and dues.

Check here if participant is under 18 years old.

SIGNATURE: _____ Date: _____

(If participant is under 18, Release must be signed by parent or legal guardian, **not by trainer or instructor**. This release form is valid only when signed personally by the participant. **Signatures of all others, with the exception of a parent or legal guardian of a minor, will not be accepted in the event a claim is filed.**)