

Indoor Show

Halloween Spooktacular Indoor Dressage Schooling Show

October 22, 2022

Windenoak Equestrian Center • Seymour, WI

Judge: Fatima Pawlenko-Kranz (IL)

USEF-R Dressage, Equitation • USEF-R, Western Dressage

Show Management reserves the right to vary or add officials, as needed, based upon entries.

This show is recognized by WDAA, NEWDA & WDCTA and follows rules set forth by the United States Equestrian Federation (USEF).

A USDF Regional Schooling Show Awards Program Participating Competition (Pending).



WDAA #22-408

PLEASE PRINT:

Rider Name: _____

Horse Name: _____

Street _____

*Horse USDF No: _____

City: _____ State: _____ Zip: _____

Breed: _____

Phone: _____

Color: _____ Sex: _____

Email: _____

Height: _____ Age: _____

Junior/Young Rider (21 & under) Birthdate: _____

Owner Name (If other than rider): _____

*Rider USDF No: _____ *USDF Regional Schooling Show Awards Program

*Owner USDF No: _____

Classes will be split by division. Riders must clearly specify division choice – Open or Junior/Young Rider.

**** Put an "X" in the box of the class you would like to ride in. – NOTE! Classes listed are NOT necessarily in the order of go. ****

- 1.) USDF Intro Level, Test A
- 2.) USDF Intro Level, Test B
- 3.) USDF Intro Level, Test C
- 4.) USEF Training Level, Test 1
- 5.) USEF Training Level, Test 2
- 6.) USEF Training Level, Test 3
- 8.) USEF First Level, Test 1
- 9.) USEF First Level, Test 2
- 10.) USEF First Level, Test 3
- 12.) USEF Second Level, Test 1
- 13.) USEF Second Level, Test 2
- 14.) USEF Second Level, Test 3
- 15.) USEF Third Level, Test 1
- 16.) USEF Third Level, Test 2
- 17.) USEF Third Level, Test 3
- 18.) USEF Fourth Level, Test 1
- 19.) USEF Fourth Level, Test 2
- 20.) USEF Fourth Level, Test 3
- 21.) Dressage Seat Equitation

- 22.) USDF/USEF Test of Choice
Indicate Test Choice: _____
- 24.) USDF Musical Freestyle, Test of Choice
Indicate Test Choice: _____
- 25.) WDAA Western Dressage Intro, Test 1
- 26.) WDAA Western Dressage Intro, Test 2
- 27.) WDAA Western Dressage Intro, Test 3
- 28.) WDAA Western Dressage Intro, Test 4
- 29.) WDAA Western Dressage Basic, Test 1
- 30.) WDAA Western Dressage Basic, Test 2
- 31.) WDAA Western Dressage Basic, Test 3
- 32.) WDAA Western Dressage Basic, Test 4
- 33.) WDAA Western Dressage Level 1, Test 1
- 34.) WDAA Western Dressage Level 1, Test 2
- 35.) WDAA Western Dressage Level 1, Test 3
- 36.) WDAA Western Dressage Level 1, Test 4
- 37.) WDAA Western Dressage Level 2, Test 1
- 38.) WDAA Western Dressage Level 2, Test 2
- 39.) WDAA Western Dressage Level 2, Test 3

- 40.) WDAA Western Dressage Level 2, Test 4
- 41.) WDAA Western Dressage Level 3, Test 1
- 42.) WDAA Western Dressage Level 3, Test 2
- 43.) WDAA Western Dressage Level 3, Test 3
- 44.) WDAA Western Dressage Level 3, Test 4
- 45.) WDAA Western Dressage Level 4, Test 1
- 46.) WDAA Western Dressage Level 4, Test 2
- 47.) WDAA Western Dressage Level 4, Test 3
- 48.) WDAA Western Dressage Level 4, Test 4
- 49.) WDAA Western Dressage Test of Choice
Indicate Test Choice: _____
- 50.) WDAA Western Dressage Musical Freestyle, Test of Choice
Indicate Test Choice: _____
- 51.) Non-Compete Horse
- 52.) Dressage Leadline Class
- 53.) Western Dressage Leadline Class
- 54.) Halloween Costume Class

**** REMINDER:** Please sign **BOTH** waivers on reverse side. ******

Rules & Guidelines for the Show:

- No more than (3) rides per horse/rider combination.
- Only (1) horse/rider combination per entry form.
- All signatures are required on entry form, including rider and owner. Epona Enterprises reserves the right to decline incomplete entries.
- Competitors may begin arriving on the show grounds from 2 p.m. - 8 p.m. on Friday, October 22nd.
- A copy of your horses' 2022 Coggins, along with current vaccination records (with in the last 6-months), is required with every show entry.
- Show jackets are not required. However, appropriate riding boots and dressage tack are required, according to USEF rules. Braiding is optional.
- All riders are **REQUIRED** to wear an ASTM/SEI approved helmet at all times while mounted. See USEF Rule DR120.6.
- No refunds will be given after closing date. Prior to the closing date, refunds will only be given with a veterinarian and/or doctor's certificate. Only class fees will be refunded. No refunds on office or stabling fees.
- Ride times will be emailed to all riders. Please provide an email address on entry form. Ride times will also be posted on www.foxvillage.com. Please do not call Windenoak Equestrian Center!
- Questions, please call (920) 819-2891 or e-mail at dressageshowsec@aol.com.

Reminders:

- Food will be available on the show grounds.
- Ribbons and High Point awards will be presented for each level, except for Western, which all levels will be combined into one high point award.

•• IMPORTANT – WESTERN DRESSAGE RIDERS – PLEASE READ •••

The WDAA Western Dressage tests were updated, and became effective March 1, 2022. Please make sure you have been practicing the correct tests for this show. They can be found at <http://westerndressageassociation.org/wdaa-tests/>.

Entry Fee = \$25 per class / Non-Compete = \$25 / Leadline = \$10	\$
Stabling = \$45 (no sharing, filled upon order of entry received)	\$
Bedding = \$10 per bag (not included with stall, order on entry)	\$
Haul-In = \$35 (showing out-of-trailer)	\$
Class Sponsorship = \$25	\$
Late Fee = \$20 (per entry)	\$
Office Fee (All entries must pay)	\$ 20.00
Checks payable to: Epona Enterprises	GRAND TOTAL: \$

STABLING GROUP REQUESTS:

Please mail entry forms, coggins and fees (check or money order to **Epona Enterprises, LLC**) to:

Deb Heier – Competition Secretary
P.O. Box 12812 • Green Bay, WI 54307-2812
or fill out online at www.equestrianentries.com

ENTRIES CLOSE: October 12, 2022

(Entries must be postmarked by the closing date.)

EPONA ENTERPRISES, LLC

RELEASE, WAIVER, HOLD HARMLESS, DEFEND, AND INDEMNIFICATION AGREEMENT THIS DOCUMENT AFFECTS YOUR LEGAL RIGHTS – PLEASE READ CAREFULLY BEFORE SIGNING

The undersigned, as a Participant/Spectator/Visitor/Independent Contractor/Volunteer (collectively "Participant"), on his/her own behalf and, if applicable, as the Parent/Legal Guardian of a minor Participant (minor included as "Participant"), for good and valuable consideration, agrees to the terms and conditions of this Release, Waiver, Hold Harmless, Defend, and Indemnification Agreement ("Release"):

- 1. Assumption of Risk and Waiver:** Participant understands and accepts the risks of engaging in Equine Activities, while mounted or unmounted, as well as merely being near a horse or pony (collectively "equine"), including: (1) the propensity of an equine to behave in a way that may result in injury or death to a person on or near it (ex.: jump, run, kick, buck, bolt, spin, rear up, strike, bite, stumble, fall, etc.); (2) the unpredictability of an equine's reaction to a sound (ex.: doors opening and closing, snow and ice falling, rain, wind, thunder, voices, music, guns, etc.), movement or unfamiliar object (ex.: machinery, equipment, jumps, ground poles, cones, flowers, flags, golf carts, mini-bikes, whips, bats, construction material, etc.), person or animal (ex. leashed or unleashed dogs, wildlife, horses, etc.); (3) a collision with an object or another animal; (4) the potential for a person participating in an equine activity to act in a negligent manner, to fail to control the equine or to not act within his or her ability; and (5) natural hazards, including surface and subsurface conditions (ex.: ground holes, uneven terrain, slippery or deep footing, etc.). Participant agrees that engaging in equine activities under this Release includes, but is in no way limited to, those defined in the Wisconsin Equine Activity Liability Act, as well as riding another's equine, petting, grooming, leading, mounting, feeding, watching, transporting, and otherwise interacting with or merely being in the vicinity of equines (collectively "Equine Activities"). Participant understands the injuries, death, loss, and property damage that may result from the accepted risks of engaging in Equine Activities or just being near an equine, that equines are powerful and have the potential to be dangerous, even without warning, and that the risks listed in this Release are just a sampling and Participant is not relying on Released Parties to list all possible equine-related risks. Participant understands that Epona Enterprises, LLC requires the wearing of an ASTM/SEI-certified equestrian hard hat ("Hard Hat") for anyone mounted on an equine. Participant agrees, on his/her own behalf and on behalf of his/her minor Participant, that he/she understands and agrees to assume the risks and dangers inherent in Equine Activities, agrees to at all times to be responsible for Participant's personal safety, to purchase and maintain Participant's own health and liability insurance, remain financially responsible for Participant's medical expenses, and waives Participant's right to any claims arising from participation in or observation of any Equine Activities, riding an equine owned by Participant or someone else, whether on or off the property where the horse is stabled and/or transported to, being near an equine, or merely being present on real property where equines are present, regardless of whether Participant's presence on such real property is related to equines or Equine Activities. The following shall be included as Released Parties under this Release: Epona Enterprises, LLC, Deborah Heier, the owner/lessor/lessee/licensor/licensee of the equine involved in the Loss and/or the real property where the Loss occurred, and their respective spouse, family, heirs, agents, assigns, trustees, beneficiaries, employees, working students, volunteers, independent contractors, guests, visitors, invitees, members, managers, officers, directors, owners, lessors, lessees, licensors, licensees, or others acting on their behalf (collectively "Released Parties").
- 2. Release, Hold Harmless, Defend and Indemnify, Photo Release:** Participant agrees to release and hold harmless, defend and indemnify Released Parties for any illness, injury, death, damage, or other loss (collectively "Loss") incurred by Participant or to his/her property even if such Loss is caused in whole or in part by negligence or other fault of Released Parties (except reckless or intentional misconduct). Participant grants permission for Released Parties to use Participant's photograph and video depictions in any format.
- 3. Governing Law, Jurisdiction, No Expiration, Time and Loss Limitation, Attorneys' Fees, Jury Waiver:** This Release shall be construed and enforced in accordance with the laws of the State of Wisconsin. All disputes relating to the interpretation and enforcement of this Release shall be resolved exclusively by the state court in Brown County, Wisconsin. Participant submits to the jurisdiction and venue of the Court for such purpose. Participant agrees that this Release does not expire. Participant agrees that any and all claims for Loss by Participant must be brought within one (1) year of the date accrued and any claim for personal property Loss is limited to \$500.00. Participant agrees to reimburse Released Parties for all attorneys' fees and costs incurred by Released Parties in enforcing the terms of this Release and/or in defending or prosecuting any claims involving, or in any way relating to, Participant. Participant agrees to waive trial by jury in any action with Released Parties.
- 4. Severability, Modification:** If any provision of this Release is deemed invalid or unenforceable, the remaining provisions shall be valid and enforceable to the fullest extent of the law. This Release can only be modified in writing signed by Participant and Deborah Heier.
- 5. Participant Certification:** Participant certifies that he/she has read this entire Release and understands, agrees, and intends voluntarily on his/her own behalf, and on behalf of minor Participant, Participant's parents, spouse, family members, heirs, agents, trustees, beneficiaries, guests, visitors, invitees, representatives, relatives, successors, and assigns, to be bound by all of the terms and conditions contained herein.

NOTICE A PERSON WHO IS ENGAGED FOR COMPENSATION IN THE RENTAL OF EQUINES OR EQUINE EQUIPMENT OR TACK OR IN THE INSTRUCTION OF A PERSON IN THE RIDING OR DRIVING OF AN EQUINE OR IN BEING A PASSENGER UPON AN EQUINE IS NOT LIABLE FOR THE INJURY OR DEATH OF A PERSON INVOLVED IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES, AS DEFINED IN SECTION 895.481(1)(E) OF THE WISCONSIN STATUTES.

RIDER/PARTICIPANT (Mandatory):

Signature: _____ Date: _____

Print Name: _____

OWNER/PARTICIPANT (Mandatory):

Signature: _____ Date: _____

Print Name: _____

I, the undersigned, am one of the parents of the above-named minor participant (and/or the duty appointed legal guardian of such minor), and I have full authority to sign this waiver for and on the behalf of the minor. My signature on this form constitutes expression of my understanding and consent to the total and unconditional waiver set out above.

PARENT (Required if rider is under the age of 18):

Signature: _____ Date: _____

Print Name: _____

EMERGENCY CONTACT (Mandatory):

Name & Relationship (Print): _____ Phone: _____

EPONA ENTERPRISES, LLC

RELEASE, WAIVER, HOLD HARMLESS, ASSUMPTION OF RISK, DEFEND, AND INDEMNIFY AGREEMENT FOR INFECTIOUS DISEASES INCLUDING COVID-19 RELATED LOSS

BY SIGNING THIS AGREEMENT, YOU ARE GIVING UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO RECOVER DAMAGES IN CASE OF ILLNESS, INJURY, OR DEATH (collectively "Loss") ARISING OUT OF YOUR PRESENCE AT THE EVENT (defined below) SPECIFICALLY RELATED TO COVID-19 OR ANY OF ITS MUTATIONS, FORMS, DERIVATIVES, OR OTHER INFECTIOUS DISEASES (collectively "COVID-19").

I, the undersigned, hereby enter into this Release, Waiver, Hold Harmless, Assumption of Risk, Defend, and Indemnify Agreement for Infectious Diseases Including COVID-19 Related Loss ("Agreement") in consideration of my, and my minor child if applicable (collectively "I", "me", or "my"), ability and permission to access, utilize, occupy, visit, attend, or otherwise be present at or participate in an Epona Enterprises, LLC sponsored, hosted, organized or in any other manner Epona Enterprises, LLC affiliated, event or activity (collectively "the Event") during and after the COVID-19 pandemic, for any reason, whether or not related to equines or equine activities.

- 1. Risk of Loss/Protective Measures/No Guarantee:** By signing this Agreement, I hereby acknowledge that I have familiarized myself with the risk of Loss being present at the Event for any reason whatsoever and the protective measures at the Event intended to minimize my risk of exposure to COVID-19. I agree the protective measures are satisfactory and sufficient for me to accept and assume the risk of my COVID-19 exposure resulting from accessing, utilizing, occupying, visiting, attending, or otherwise being at the Event attended by other individuals; however, I understand and agree that Released Parties cannot guarantee: (a) the protective measures can or will prevent my exposure to COVID-19; (b) will be complied with by all individuals at the Event; or (c) that others will not act in a negligent manner that may contribute to my Loss or contraction of COVID-19. I agree to fully comply with all protective measures required by Epona Enterprises, LLC as they now exist or may be revised from time-to-time. I accept full responsibility for my own safety and the sanitization of myself and my personal property and/or other personal property I contact at the Event. If I am a parent or legal guardian of a minor individual at the Event, I consent to the minor's presence at the Event and agree to remain responsible for the minor's Loss and minor's compliance with all required protective measures.
- 2. Medical Attention/Disclosure:** I understand and agree that engaging in equine activities or merely being at the Event exposes me to inherent risks of personal injury that may require medical attention including, but not limited to, first aid and/or emergency medical care. I therefore consent to personal contact by Released Parties and/or medical personnel deemed necessary for providing for my care at the Event and/or the hospital, even at the risk of my COVID-19 exposure. I agree to hold Released Parties harmless for such medical attention and any Loss directly or indirectly resulting therefrom. I agree that in the event I am diagnosed as infected with COVID-19, I authorize medical personnel to provide Epona Enterprises, LLC information regarding my Loss and treatment for contact tracing or any other purpose.
- 3. Release/Hold Harmless/Defend/Indemnify:** I agree to release, hold harmless, defend, and indemnify Epona Enterprises, LLC, Deborah Heier, the owner/tenant/lessor/user/occupier of the Event facility, and their respective relatives, heirs, trustees, beneficiaries, related entities, members, managers, owners, officers, directors, agents, assigns, employees, working students, volunteers, contractors, trainers, clinicians, guests, visitors, invitees, partners, lessors, lessees, licensors, licensees, and others acting on their behalf (collectively "Released Parties") from and against any liability, attorneys' fees, costs, or other Loss I may incur arising out of or in any way connected with my exposure to or contraction of COVID-19 as a direct or indirect result of my presence at the Event, whether by my negligence or the negligence or other wrong doing of Released Parties (except reckless or intentional misconduct).
- 4. Bound Parties/Governing Law/Jury/No Expiration/Time Limitations/Severability/Modification:** I understand and agree the terms of this Agreement are binding on my spouse, partner, family members, minor child, heirs, agents, trustees, beneficiaries, representatives, relatives, successors, and assigns and I agree to all the terms and conditions of this Agreement on my own behalf and on behalf of my minor for purposes of permitting our presence at the Event. In the event of a claim or dispute arising out of or relating to the interpretation or enforcement of this Agreement, I agree Wisconsin law applies, that all disputes surviving this Agreement must be resolved exclusively by the state court in Brown County, Wisconsin and I waive my right to a jury trial. I agree that this Agreement does not expire and that any surviving claims must be brought within one (1) year of the date accrued. If any provision of this Agreement is deemed invalid or unenforceable, the remaining provisions shall be valid and enforceable to the fullest extent of the law. This Agreement can only be modified in writing signed by myself and Deborah Heier.

WARNING

BEFORE SIGNING THIS FORM, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND ALL OF THE INFORMATION CONTAINED THEREIN. I ACKNOWLEDGE THAT I DO NOT NEED ANY FURTHER EXPLANATION OF ITS CONTENTS AND WAIVE ANY FURTHER EXPLANATION. I HAVE VOLUNTARILY AGREED TO ITS TERMS AND PROVISIONS, UNDERSTAND AND AGREE THAT I HAVE OTHER FACILITIES TO CHOSE FROM, AND AGREE THAT NO OTHER STATEMENT, REPRESENTATIONS OR INDUCEMENT, APART FROM WHAT IS STATED IN THIS AGREEMENT, HAVE BEEN MADE TO ME TO OBTAIN MY CONSENT AND MY SIGNATURE.

I AM PARTICIPATING IN THIS SHOW AS A:

RIDER/DRIVER/HANDLER/VAULTER/LONGEUR OWNER TRAINER OFFICIAL STAFF VOLUNTEER COACH

Signature: _____ Date: _____

Print Name: _____

Address: _____

Phone: _____ E-mail: _____

PARENT (Required if participant is under the age of 18):

Signature: _____ Date: _____

Print Name: _____

EMERGENCY CONTACT (Mandatory):

Name & Relationship (Print): _____ Phone: _____