



# OXER FARM 2022 SCHOOLING SHOW PRIZE LIST AND ENTRY FORM

## REQUIRED RIDER AND HORSE INFORMATION (Please Print)

LAST NAME: \_\_\_\_\_ FIRST NAME \_\_\_\_\_

NAME OF HORSE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

JR RIDER? YES NO **CIRCLE SHOW YOU ARE ENTERING** Aug 20 Sept 24 Oct 15

**PRINT AND MAIL TO: Oxer Farm, 6940 Kenimer Road, Clermont, Georgia 30527 Phone: 770-654-3934  
OR EMAIL entry forms, releases and coggins to [scarnet@carnetstudio.com](mailto:scarnet@carnetstudio.com)**

### INSTRUCTIONS:

1. Fill out separate entry form for each horse and rider entered
2. PRINT & MAIL entry form, with fees, GDCTA release & Coggins to the address above,  
OR EMAIL ALL DOCUMENTS to [scarnet@carnetstudio.com](mailto:scarnet@carnetstudio.com). **No payments or paperwork accepted on show day. All materials & payments must be submitted in advance by the closing date (no exceptions)**
3. **We accept PayPal.** If you use PayPal, email your entry forms and use the PayPal button on our website to pay your fees. Include the \$5 convenience fee with your payment.
4. No refunds after the closing date unless we can fill your spot.

DRESSAGE TESTS - USDF 2019										
CHECK	TEST	FEES		CHECK	TEST	FEES		CHECK		
<input type="checkbox"/>	2019 Intro A	\$30		<input type="checkbox"/>	19 - First 1	\$30		<input type="checkbox"/>	Dressage Equitation Class	\$20
<input type="checkbox"/>	2019 Intro B	\$30		<input type="checkbox"/>	19 - First 2	\$30				
<input type="checkbox"/>	2019 Intro C	\$30		<input type="checkbox"/>	19 - First 3	\$30		<input type="checkbox"/>	Higher Levels on Request Show level _____	\$35
<input type="checkbox"/>	19 -Training 1	\$30		<input type="checkbox"/>	19 -Sec 1	\$30				
<input type="checkbox"/>	19 -Training 2	\$30		<input type="checkbox"/>	19 -Sec 2	\$30		<input type="checkbox"/>	Musical Freestyle Show level _____	\$35
<input type="checkbox"/>	19 -Training 3	\$30		<input type="checkbox"/>	19 -Sec 3	\$30				
	TOTAL				TOTAL				TOTAL	
COMBINED TESTS										
	TEST			FENCE HEIGHT	FEES	TOTAL				
<input type="checkbox"/>	Pre-Amoeba CT: Dressage Test - USDF 2019 Intro A Entry fee includes one schooling round			Ground poles	\$40					
<input type="checkbox"/>	Amoeba CT: Dressage Test - USDF 2019 Intro B			Fences 18"	\$50					
<input type="checkbox"/>	Starter CT: Dressage Test - USEF 2022 Starter Test			Fences 2'3	\$50					
<input type="checkbox"/>	Beg Novice CT: Dressage Test - USEF 2022 Beg Nov B			Fences 2'3" - 2'6"	\$50					
<input type="checkbox"/>	Novice CT: Dressage Test - USEF 2022 Novice A			Fences 2'6" - 2'9"	\$55					
THREE-PHASE - OFFERED IN OCTOBER										
<input type="checkbox"/>	Amoeba 3 Phase: Dressage Test - USDF 2019 Intro B			Fences 18"	\$65					
<input type="checkbox"/>	Starter 3 Phase: Dressage Test - USEF 2022 Starter Test			Fences 2'3	\$65					
<input type="checkbox"/>	Beg Novice 3 Phase: Dressage Test - USEF 2022 Beg Nov B			Fences 2'3" - 2'6"	\$65					
<input type="checkbox"/>	SCHOOLING ROUNDS - ALL STADIUM JUMPING DIVISIONS ONE ROUND PER RIDER, WRITE IN DIVISION ON RIGHT				\$30					
	<b>ADMIN FEE - per horse/rider entry required</b>								<b>\$35</b>	
<input type="checkbox"/>	<b>CHECK HERE IF USING PAYPAL TO PAY YOUR FEES : Add \$5.00 service fee</b>									
	<b>GRAND TOTAL (entry fees + admin fee + PayPal if any)</b>								<b>\$</b>	_____

RELEASE OF LIABILITY: I request permission to participate in horseback riding cross-country riding and jumping at Oxer Farm. I fully understand that these are dangerous activities and participate or allow my children to participate knowing that they are dangerous. I accept and assume all the risks of injury (including death) to myself, my children, my horse(s) and my property. I represent and warrant that I have the authority to give this release. In exchange for my permission to participate in activities at Oxer Farm (including lessons, competitions, and unsupervised horseback riding), I release and agree not to make or bring any claim of any kind against Oxer Farm, Sandra or Jean Carnet, Marc Carnet, or Catherine Everett, their employees, heirs, adjoining landowners or guests for any injury (including death) to myself, my children, my horse(s) or my property whether or not from anyone's negligence. I also agree that if any makes any claims because of an injury to the above named, I will keep all those released by this agreement free of any damages or costs because of those claims. I guarantee to carry my own accident and health insurance. I agree to implement these or assume all financial costs resulting from my or my children's participation at Oxer Farm. This guarantee applies to any activity at Oxer Farm or on Oxer Farm sponsored trips, whether or not any horse is involved. **WARNING UNDER GEORGIA LAW AN EQUINE ACTIVITY SPONSOR OR EQUINE PROFESSIONAL IS NOT LIABLE FOR ANY INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES, PURSUANT TO CHAPTER 12 OF TITLE 4 OF THE OFFICIAL CODE OF GEORGIA ANNOTATED.**

NAME (print or type)

Signature

PARENT OR GUARDIAN FOR MINOR CHILD:

DATE:



## GDCTA Hold Harmless Clause

The undersigned competitor/rider and all signors below hereby (1) agrees to release the management of this show or clinic, their officers, directors, employees, members, or agents, and the owners or managers of the grounds where this event is held, from any loss, damage, liability, or injury arising out of or resulting from this show or clinic or competitors/riders participation therein; (2) agrees to indemnify, hold harmless and defend the Georgia Dressage and Combined Training Association, Inc., the organizer, facility owner, and the management of this show or clinic from and against any and all claims for loss, damage, liability, or injury, however caused, resulting directly or indirectly from competitors/riders entry or participation in this show or clinic or from acts or omissions of competitor/rider or competitor's agents; and (3) acknowledges that activities with and around horses and horse shows or clinics involve inherent risks including but not limited to substantial risk of bodily injury, death, property damage and other dangers including, but not limited to, bodily injury or death resulting from kicks and bites, falling off horse or horse(s) falling on Rider, being dragged by a foot caught in the stirrups, Rider being thrown by horse, equipment failure or collision with horse(s) or vehicles or other inanimate objects, as well as any and all risks of contracting Covid-19. In the event of injury to competitor/rider or to competitor's/rider's animals, permission is hereby granted to management for emergency medical treatment.

Every entry at a Georgia Dressage and Combined Training Association, Inc. (GDCTA) recognized competition or clinic shall constitute an agreement and affirmation that all participants (which include, without limitation, the owner, lessee, trainer, manager, agent, coach, driver, handler, the horse, volunteers and staff), for themselves, their principals, representatives, employees, and agents: (1) shall be subject to the constitution and rules of the GDCTA and the local rules of the competition or clinic; (2) represent that every horse, rider, driver, and handler is eligible as entered; (3) agree to be bound by the constitution and rules of the United States Equestrian Federation (USEF) and of the competition or clinic, and will accept as final the decision of the hearing committee on any question arising under said rules, and agree to hold the competition or clinic, the GDCTA, their officials, directors and employees harmless for any action taken; (4) agree that as a condition of and in consideration of acceptance of entry, they authorize the GDCTA and the competition or clinic management to market, transfer, assign, or otherwise make use of any photographs, likenesses, films, broadcasts, cablecasts, audiotapes, or videotapes taken of the horse(s) and participant(s) while on the grounds, incident to, or in transit between the stabling facility and the event site, in any way they see fit for the promotion, coverage, or benefit of the event, sport, or the GDCTA, without compensation to any of them, so long as the use neither jeopardizes amateur status nor endorses a specific product or service, and hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to invasion of privacy, right of publicity, or to misappropriation; and (5) agree that they participate voluntarily in the competition or clinic fully aware that horse sports and the competition or clinic involve inherent dangerous risk of serious injury or death, and by participating they expressly assume any and all risks of injury or loss, and they agree to indemnify and hold harmless the GDCTA, the competition or clinic, and the officials, directors, employees, and agents from and against all claims including for any injury or loss suffered during or in connection with the competition or clinic, whether or not such claim, injury, or loss resulted, directly or indirectly, from the negligent acts or omissions of said officials, directors, employees, or agents of the GDCTA, competition or clinic. The construction and application of USEF Rules are governed by laws of the State of New York, and any action instituted against USEF must be filed in New York State, see Article 1502.5.

### WARNING

**Under Georgia law, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in equine activities resulting from the inherent risks of equine activities, pursuant to Chapter 12 of Title 4 of the Official Code of Georgia Annotated.**

Signed: \_\_\_\_\_  
**(Rider/Driver/Handler) (Mandatory)**

Date: \_\_\_\_\_

Signed: \_\_\_\_\_  
**(Horse Owner/Agent) (Mandatory)**

Date: \_\_\_\_\_

Signed: \_\_\_\_\_  
**(Trainer) (Mandatory)**

Date: \_\_\_\_\_

Signed: \_\_\_\_\_  
**(Parent/Guardian) (If rider is under age 18)**

Date: \_\_\_\_\_

Signed: \_\_\_\_\_  
**(Coach) (If applicable)**

Date: \_\_\_\_\_



# 2021 Membership Application

GDCTA is a USDF Group Member Organization and a USEA Affiliate

**Print legibly to avoid errors**



Select One:  New Member  Renewal

Name:	USDF#:	Equine Discipline Select only Your Primary Discipline  Dressage Eventing	Adult Amateur
Street:	USEA#:		Collegiate
City:	State: Zip:		Email News
Email:	Phone:		

**ANY BOX OR CIRCLE LEFT UNCHECKED WILL BE CONSIDERED "NO"**

I wish to participate in GDCTA's Schooling Show Awards Program: Yes No  
or in GDCTA's "USDF/USEF/USEA" Recognized Awards Program: Yes No

MEMBERSHIPS:	Amount	Jr. Birth Date
Junior Primary 1 Yr. - \$55.00 3 Yr. - \$165.00		
Senior Primary 1 Yr. - \$60.00 3 Yr. - \$180.00		
<b>Junior 3 year memberships are non-refundable and are non-transferable.</b>		
Family \$80.00 (includes 1 Primary and 1 Supporting Member)		(if under 18)
Supporting Member Name:		(if under 18)
Additional Supporting Family Members: \$20.00 each/year or \$60 each if a 3 year.		
2nd Supporting Member:		(if under 18)
3rd Supporting Member:		(if under 18)

GDCTA membership year is December 1 through November 30 each year. A senior member is a member who has reached their 18th birthday by January 1st of the membership year. A junior member is a member who has not reached their 18th birthday of January 1st of the membership year.

Volunteer for a GDCTA Event	Support GDCTA with a Tax Deductible Sponsorship	
Your active participation keeps dressage and eventing alive in our region and is vital to GDCTA's mission! Check off the areas you would be interested in!	GDCTA sponsor contributions are a tax-deductible gift to our organization 501(c)(3) in support of the continued development for Dressage and Eventing in our area. Contributions are required to be incentive free gifts and may not be exchanged for advertising or other incentives.	
Runner	\$10	\$150
Ring Steward	\$25	\$200
Board Member	\$50	\$250
Gala	\$100	Other
Write for Newsletter		
Credit card payment by M/C, Visa, Discover & Amex.		
Card#:	You may also choose to contribute to the GDCTA Grant Program which provides members, who are in good standing, an \$800 grant to further their equine education. See www.gdcta.org for details.	
Exp. Date:		
Billing Zip:		
3 Digit code on back of card:		
Name on Card:		
Signature:	Other Contribution	

Please make checks payable to GDCTA and mail or Fax to:  
Mary Lou Freil, 3908 Balleycastle Ct, Duluth, GA 30097 - 770-330-2489  
FAX - 770-727-0146  
Email: gdctamembership@gmail.com

Date Received: \_\_\_\_\_  
Check Numbers: \_\_\_\_\_  
Amount: \$ \_\_\_\_\_