

Sargent Equestrian Center Presents

DOUBLE "D" SERIES

Carriage Driving Dressage & Derbies

Sargent Equestrian Center is holding a carriage driving series including 3 Driving Derbies and 2 Driven Dressage Events.

Events are open to all driving enthusiasts.

For Dressage, drivers can choose between training, preliminary and intermediate tests offered and a separate "test of choice" class, drive one or both (see entry form). For the Derbies, Horse and driver will navigate through a course consisting of pairs of cones and marathon-type obstacles. Competition is judged based on time and penalties. Driving Derby number 3 is a qualifying Derby for the "Dash-4-Cash", Jackpot Derby taking place during the Kentucky Derby West Benefit.

Top scores will "Drive Off" for the \$\$\$\$\$\$ on Saturday.

2018 Show Dates

February 24—DD #1

March 24—DD #2

May 4—Derby #3

Qualifying Derby (no dressage)

May 5 "Dash-4-Cash"

(top 10 drivers from Qualifying Derby)

Prize \$\$ to 5th place!

Come join the fun!!

Divisions:

Training
Preliminary
Intermediate
Intermediate II

Information

Start Time: Dressage 9:00 am, Derby 1PM

Derby Course Walk: 10:00 AM

Derby Competitors Briefing: Noon

Qualifying Derby Start Time: 1 PM

"Dash-4-Cash" Start Time: 12:30PM

- ◆ Qualifying Derby & Dash-4-Cash: Outdoor Arena (including water hazard and wooden bridge)
- ◆ Limited Stabling Available \$40/night
- ◆ Derby #1-2 \$45 (\$50 day of event)
- ◆ Dressage \$25/test (\$35 after closing date)
- ◆ "Dash-4-Cash" \$75
- ◆ Information, rules available online at www.sargentequest.com

Classes (Classes may be combined):

Novice Pony	Open Pony
Novice Horse	Open Horse
Novice Multiple	Open Multiple





DRIVEN DRESSAGE



Double “D”

The following tests are being offered

Cost: \$25 / Test before closing date \$35 / Test Post-Entry

Class No.	Class Description
1	Int II 3*B HP1 (Horse & Pony Single)
2	Int II 3*B H P2 (Pair)
3	Int II 3*B H P4 (Horse & Pony 4's)
4	Int TOC II3*B HP1, 3*B HP2, 3*B HP4
5	Int Canter Test I (Single)
6	Int Test 7 (Pairs & Multiples)
7	Test of Choice I2 or I7
8	Prelim Test 5 (Multiples)
9	Prelim Test 2 (Single & Pair)
10	Prelim Test 4 (Single & Pair)
11	Test of Choice P2 , P4 or P5
12	Training Test 2
13	Training Test 4
14	Test of Choice T2 or T4

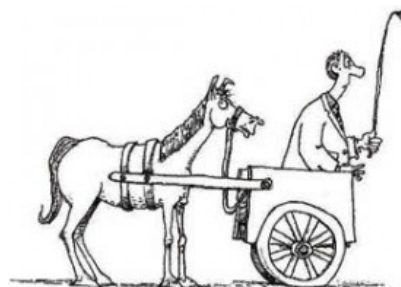
All Test are POM and can be found at: americandrivingsociety.org/dressage_test.asp

Please use the included Double “D” Entry Form.

SARGENT EQUESTRIAN CENTER

2018 DOUBLE "D" ENTRY

Please place a check mark in the box of the date you are entering.
One form/entry.



Feb 24 **Mar 24** **May 4** **May 5**
DD #1 *DD #2* *Qualifying Derby* *"Dash-4-Cash"*

Name: _____

Address: _____

City, State, ZIP: _____

e-Mail: _____

Phone: _____

Class (circle):

Novice Pony Open Pony

Novice Horse Open Horse

Novice Multiple Open Multiple

Name of Horse(s):	Height	Breed	Age	Color	Gender

	Entry Fee	Comments	Amount
Driven Dressage (see Dressage Form)	\$25/Test		\$
Derby Entry Fee	\$45.00		\$
"Dash-4-Cash" top 10 times from Derby #3 (refunded if you don't qualify)	\$75.00		\$
Overnight Camping	\$20.00/night		\$
Stall (if available)	\$40.00/night		\$
Bunkhouse (if available)	\$25.00/night		\$
Total payable to Sargent Equestrian Center			\$

*Do you have more than one entry?	YES	NO	
*Are you sharing Equipment?	YES	NO	If YES, with whom? _____
*Are you sharing a horse?	YES	NO	If YES, with whom? _____
(*Depending on the number of entries and the divisions entered it may not be possible to share equipment or horses. We will do our best to accommodate.)			
Add'l Information:			

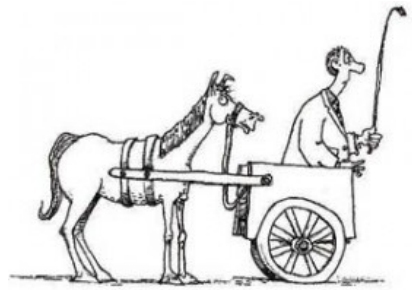
SARGENT EQUESTRIAN CENTER
 SEC "DD"
 15757 E. Sargent Rd.
 Lodi, CA 95240

Please mail completed Entry Form and check payable to
 Sargent Equestrian Center to:

SARGENT EQUESTRIAN CENTER

2018 DOUBLE "D" DRESSAGE ENTRY

Please place a check mark in the box of the date you are entering.
One form/entry.



Feb 24 **Mar 24**
DD Dressage #1 *DD Dressage #2*

Driver Name:

An "Entry" or "Turnout" is one horse(s) and driver combination.

If you are showing more than one turnout please complete a separate entry form for any additional horse/driver combinations.

Class (circle):

Novice Pony

Open Pony

Novice Horse

Open Horse

Novice Multiple

Open Multiple

Name of Horse(s):	Class #	Class Desc.	TOC

	Entry Fee	Qty	Amount
Driven Dressage (see Dressage Form)	\$25/Test (\$35 after Closing date)		\$

*Do you have more than one entry?	YES	NO	
*Are you sharing Equipment?	YES	NO	If YES, with whom? _____
*Are you sharing a horse?	YES	NO	If YES, with whom? _____
(*Depending on the number of entries and the divisions entered it may not be possible to share equipment or horses. We will do our best to accommodate.)			
Add'l Information:			

Please mail completed Entry Form and check payable to
Sargent Equestrian Center to:

SARGENT EQUESTRIAN CENTER
 SEC "DD"
 15757 E. Sargent Rd.
 Lodi, CA 95240

Entry# _____

“Dash-4-Cash” Driving Derby

Announcers Form

(print clearly and use big letters)

Name of competitor: _____

City: _____ State: _____

Owner (if different): _____

Division: _____

Make & Model or Type of Carriage: _____

Name of Horse(s)	Height	Breed	Age	Color	Gender

Any special stories about horses:

Name of Groom: _____ City: _____

Any special stories about groom:

Anything else:

Sargent Equestrian Center

USE AGREEMENT AND LIABILITY RELEASE

All Clinic Participants and Show Competitors must sign and send with registration (PLEASE READ CAREFULLY)

This agreement, dated [REDACTED] is made between Sargent Equestrian Center LLC, a California corporation ("SEC"), and [REDACTED] (print your name). WHEREAS, I understand and acknowledge that activities involving horses ("Equine Activities"), including but not limited to the mounting, riding, walking, dismounting, grooming, training, handling, feeding, and otherwise being in the physical proximity of horses is a dangerous activity which produces a foreseeable risk of mortal or serious personal injury and/or property loss to the participant in such activity as well as to the person or property of others; and WHEREAS, I understand and recognize and warrant that this Release, Waiver of Liability and Indemnity Agreement ("Release") is being voluntarily and intentionally signed and agreed to, and that in signing this Release I know and understand that this Release may further limit the liability of equine professionals to include any activity, whatsoever, involving horses, including death, personal injury and/or damage to property. NOW THEREFORE, in consideration of being granted access and/or use of the facilities of SEC and for other good and valuable consideration, receipt of which is hereby acknowledged, I agree as follows:

1. Assumption of the Risk. I hereby assume full responsibility for, and risk of, any death or bodily injury to myself or others (including, but not limited to, those matters set forth in the above recitals) and damage to or destruction of my property or the property of others, caused by my engaging in any Equine Activity either on the premises of SEC or elsewhere while working with an SEC equine professional, unless such bodily injury or property damage is attributable in full or in part to the gross negligence of SEC. My responsibility includes, but is not limited to, payment of (i) medical costs for myself and others that I may have injured, (ii) costs to replace my own property or the property of others that I may have lost, destroyed, or damaged, and (iii) damages for other non-medical and non-property items such as pain and suffering and lost wages, etc.

2. Release, Waiver of Liability, and Discharge of Claims.

(a) I hereby release, waive, and discharge any and all claims that I may now or in the future have for damages against SEC, including its owners, occupants, tenants, subtenants, licensees, employees, officers, directors, or agents and the respective affiliated entities or persons of any one or more of them, arising directly or indirectly from my death, the death of any other person, bodily injury to me or others, or damage to my property or that of others, attributable to my engaging in Equine Activities, or my presence on SEC's premises.

(b) I acknowledge that SEC requires me to wear AHSA approved headgear with a chin strap while riding or driving. SEC requires a **minor (under 18 years of age)**, to wear such headgear at all times when riding or driving horses. I hereby release, waive, and discharge SEC, including its owners, occupants, tenants, subtenants, licensees, employees, officers, directors, or agents and the respective affiliated entities or persons of any one or more of them, against any and all claims that I may now or in the future have for damages resulting from my failure to wear headgear while riding or driving either on SEC's premises or at an offsite facility.

(c) **This release is intended to release, waive and discharge, in advance, SEC, together with its owners, occupants, tenants, subtenants, employees, officers, directors and their respective affiliates or persons of any one or more of them, from and against any liability arising out of or connected in any way with my or my guests or invitees engaging in any Equine Activities on the SEC premises or in any activity in which an SEC representative is required to attend on my behalf, and/or my or my guests or invitees presence on the SEC premises, even though such liability may be attributable, in full or in part, to the negligence, recklessness or misconduct of one or more of such persons or entities.**

(d) **Medical Authority.** I, (participant, or if minor, parents/guardians) hereby grant permission and authority to SEC, its officers and authorized employees to act for me in executing verbal instructions or if unable to contact us, to act for us in dealing with physicians, available ambulance companies and hospitals, to obtain prompt medical attention for the person named above in the event of any perceived medical emergency. I hereby covenant and agree to release SEC its owners, occupants, tenants, subtenants, employees, officers, directors, or agents and their respective affiliates or persons of any one or more of them, and hold harmless from liability connected with obtaining prompt medical attention for the person named above.

(e) In accordance with such release, waiver, and discharge, and in consideration of being allowed to utilize and/or visit the SEC facilities, I promise not to sue or demand any money or anything else of value from SEC, including any of its owners, occupants, tenants, subtenants, employees, officers, directors, or agents and their respective affiliates or persons of any one or more of them.

3. Indemnification. I agree to completely indemnify and hold harmless SEC, including any of its owners, occupants, tenants, subtenants, employees, officers, directors, or agents and their respective affiliates or persons of any one or more of them, from and against any and all claims, demands, causes of action, suits, actions, losses, liabilities, costs and/or expenses, including attorney's fees, which are occasioned by, or otherwise attributable to, matters for which I have assumed the risk and for which I am responsible in accordance with Section 1 hereof, and for any actions brought by my guests or invitees.

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4. Binding Nature of Agreement. I agree that this Agreement shall be binding on my personal representatives, heirs and assigns.

5. Governing Law. This Agreement shall be governed by, and construed in accordance with, the internal substantive laws of the State of California, without regard to the choice of law rules thereof. I hereby submit to the personal jurisdiction of the State of California. Venue for purposes of any litigation or arbitration concerning this Agreement shall be in San Joaquin County, California.

6. Severability. In the event that any provision of this Agreement shall be void or unenforceable for any reason, then such provision shall be stricken and of no force and effect. The remaining provisions of this Agreement, however, shall continue in full force and effect, and to the extent required, shall be modified to preserve their validity.

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE RELEASE OF LIABILITY AND ACCEPTANCE OF RESPONSIBILITY.

PRINT NAME OF PARTICIPANT

SIGNATURE OF PARTICIPANT

DATE

MINORS:

The undersigned declares that the undersigned is the parent or legal guardian of the minor named above. The undersigned has read the foregoing Release, Waiver of Liability and Indemnity Agreement, and in consideration of SEC allowing the below named minor onto its premises and/or allowing such minor to participate in Equine Activities, hereby agrees that all of the terms and conditions contained herein shall apply to such minor and shall be binding upon the undersigned and the minor.

If under 18, signature of both parents (if applicable) and/or guardian is required.

PRINT NAME OF PARTICIPANTS PARENT

OR LEGAL GUARDIAN OR LEGAL GUARDIAN

SIGNATURE OF PARTICIPANTS PARENT

DATE

PARTICIPANTS ADDRESS IN FULL

HOME PHONE

WORK PHONE

CELL PHONE

PERSON TO CONTACT IN CASE OF EMERGENCY

RELATIONSHIP

PHONE #1

PHONE #2

SARGENT EQUESTRIAN CENTER

15757 E. SARGENT ROAD, LODI CA 95240

OFFICE : 209.727.0200

FAX : 209.396.7800

info@sargentequest.com