

SPRING CROSS DERBY 2018
Saturday, March 10, Elem – Prelim/Modified
Sunday, March 11, Elem – Novice
 Schooling before each division
 (Entries must be RECEIVED by closing date February 26)

Description of MDHT Cross Derby courses: All rings will have cross country obstacles you would find on a typical competition course. The objective is to establish a rhythm over solid jumps in reliable consistent footing. Optimum times will be posted.

	<i>Level</i>	<i>Jumping Efforts**</i>	<i>Course Length (approx)</i>	<i>Speed*</i>
Elementary	2' – 2'3"	12 - 15**	TBD	275 mpm
Beg. Novice	2'7" max	15 - 18**	TBD	325 mpm*
Novice	2'11" max	20 - 22**	TBD	350 mpm*
Training	3' 3" max	22+**	TBD	375 mpm*
Prelim/Modified	3'5 to 3'7" max	23+**	TBD	400 mpm*

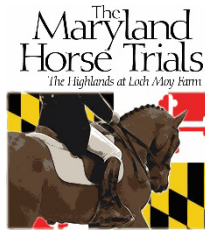
*The derby speeds are slightly higher than regular SJ to incorporate a better flow over the cross country jumps.

** Subject to change

Rules: The MDHT Cross Derby will follow the USEA/USEF Jumping phase rules. USEF rules for Cross Country dress and tack will be followed. All Riders must wear ASTM/SEI approved helmet, protective vests, and medical armband. Willful delay will be enforced. Competitors may enter more than one level but would be expected not to enter their horses less than one level below which they are currently competing. No coaching during competition, but highly encouraged on our schooling days.

There will be an audible signal to start. Fall of horse or rider during jumping phase is immediate elimination and you must leave the course.

- Time will commence at Start Flags
- Knock Down -- 4 points
- 1st Refusal -- 4 points
- 2nd Refusal at same fence -- 8 points
- 3rd refusal same fence – Elimination
- Fall of Competitor -- Elimination
- Fall of Horse -- Elimination
- 4 Refusals in Whole Course – Elimination
- Circle will count as a refusal
- Time Penalty – 1 Per Second Under Optimum Time; 2 Per Second Over Optimum Time
- Exceeding time limit – Elimination
- Leaving course (arena) -- Elimination
- Riders must wear an ASTM/SEI approved helmet and body protector as well as a medical armband.
- Combinations numbered "AB" will be as per Stadium Rules, i.e., if "B" is refused, "A" must be re-jumped on second presentation.
- Scoring: Penalties in jumping are added to determine placing for each division. Closest to optimum time and Lowest Score wins. Ties will be broken by the better time. All horses must have a current negative Coggins submitted with entry.



SPRING CROSS DERBY 2018
Saturday, March 10 & Sunday, March 11
Elem – Prelim/Modified
Schooling before each division
(Entries must be RECEIVED by closing date of each event)

- LIMITED SPACE available. Sign up early!
- **Schooling periods** will be offered before each division. Schedule to be posted in advance.
- \$25 late fee will be charged after closing date (Feb 26) BUT **entries sent after closing may not be accepted**
- A competitor may pay \$25 and sign up for EXTRA Derby rounds on the day of the show if space is available. Check in with the starter, then pay in the office.
- **Competition Cancellation – NO Refund**
- **No unauthorized motor vehicles of any kind allowed on course.**
- **We will issue paper pinnies, please bring pinny holder.**
- **\$50 returned check fee.**
- **NO unleashed dogs. Unleashed dogs will incur \$100 fine and competitor elimination.**
- **Ride times will be posted on the THURSDAY before the show at: www.themarylandhorsetrials.com.**
- Vet and Farrier will be on call.
- **Current Negative Coggins required with entry form. *We do not keep coggins on file.***
- **Loch Moy Farm Liability Waiver (below) required with entry form. *We do not keep waivers on file.***
- In the interest of horse and rider welfare and safety, **the weather forecast will be taken into account** at or after the closing date. **An inclement forecast will cancel the event.**

For additional information and to submit entry forms, contact:

The Maryland Horse Trials
1235 Park Mills Road
Adamstown, MD 21710
Phone: (301) 514-0111 ♦ Fax: (866) 533-2125
www.themarylandhorsetrials.com

The Maryland Horse Trials

2018 MDHT Spring Cross Derby Entry Form

Rider's Name: _____ Jr (18 & under) or Sr (circle one)

Address: _____ Phone: _____

City: _____ State: _____ Zip Code: _____

Email Address (please print clearly): _____

Horse's Name: _____ Owner: _____

Coggins Date: _____ Coggins Accession #: _____

Scheduling Notes: _____

	Fee	Total
<p style="text-align: center;">March 10 - Circle One</p> <input type="checkbox"/> Elementary <input type="checkbox"/> Beg Novice <input type="checkbox"/> Novice <input type="checkbox"/> Training <input type="checkbox"/> Prelim/Modified	\$75 Derby	\$ _____
<p style="text-align: center;">March 11 - Circle One</p> <input type="checkbox"/> Elementary <input type="checkbox"/> Beg Novice <input type="checkbox"/> Novice	\$75 Derby	\$ _____
Stabling: Come early the day before the event and hack along the river, or school the schooling course for no additional fee when stabling. Applies to horses entered in the event. Non-competing horses \$50 grounds fee.	\$50/night, straw only, bale of straw included for bedding, additional bales available @ \$8/bale. Muck deposit of \$25 (SEPARATE CHECK) returned if stall is stripped and swept . Please check out at secretary's stand.	\$ _____ Plus \$25 Muck Deposit (SEPARATE CHECK) per stall
Non-compete horses fee \$25 (not stabling) Non-compete stabling horses \$50	For non-competing horses	\$ _____
Late Fee - \$25 after February 26	\$25	\$ _____
Credit Card Convenience Fee \$5	ADD THIS to total if you are paying by CC or Paypal	\$5.00
<p style="text-align: center;">Make Checks Payable to: <u>Loch Moy Farm</u> (\$50 Returned Check Fee)</p> Credit Card payment available on website. Print receipt and send with entry. Also sign up through event entries (www.evententries.com)	TOTAL	\$ _____

Acceptance of risk: I acknowledge that equestrian sport is of high risk, and I am participating at my own risk and in full knowledge of the hazards and potential hazards, including death. In consideration of being allowed to participate in the sport, and use the facilities of the Maryland Horse Trials, LLC., Loch Moy Farm, LLC, I hereby assume all of the risks and I hereby release and absolve The Maryland Horse Trials, LLC, Loch Moy Farm, LLC from all responsibility, liability or claims of any nature and kind which might arise from my participation in this activity. I understand if I exhibit unsportsmanlike conduct toward any competitor, volunteer, official, judge, or staff, my entry will be forfeited immediately.

Signature of Rider: _____ Date: _____

Signature of Owner/Agent: _____ Date: _____

Signature of both Parents/Guardians: _____ Date: _____

(If Rider is a Minor)

Follow-up information on all of the above can be requested through a phone call to **(301-514-0111)**, or our [Contact Us](#) page on www.themarylandhorsetrials.com Fax: (866) 533-2125

The Maryland Horse Trials

The Highlands at Loch Moy Farm

The Maryland Horse Trials Credit Card Payment is available on the website. Don't forget to add the \$5 convenience fee.
See important checklist below!

WE DO NOT DO PAPERWORK ON SHOW DAY!!

ALL PAPERWORK and payment must be **received by us** by the closing date of each event. We only process complete entries.

If your entry is incomplete it will not be scheduled. This includes ALL items on the checklist below.

Check List:

For a complete entry

- Complete** Entry form (above)
- Participant Agreement (below)
- Check payable to Loch Moy Farm or credit card payment on website
- Current Negative Coggins

IMPORTANT:

ALL INFORMATION (PAPERWORK AND PAYMENT) MUST BE IN HAND by closing date (Feb 26). YOU WILL BE WAITLISTED IF ANY OF THE ABOVE ITEMS ARE MISSING.

The Maryland Horse Trials, LLC

At Loch Moy Farm, LLC

PARTICIPANT AGREEMENT: Assumption of Risk, Waiver of Liability, and Indemnification Agreement

Assumption of Inherent Risks: I understand and assume the inherent risks involved in equine activities, which risks include, but are not limited to, bodily injury, physical harm and even death to horses, riders, and spectators from using, riding or being in close proximity to horses may occur in normal use. I acknowledge that the behavior of any animal is contingent to some extent upon the ability of the handler or rider. Further, I understand that "inherent risks of equine activities" shall mean those dangers or conditions which are an integral part of equine activities, including, but not limited to:

- the propensity of any equine to behave in ways that may result in injury, harm, or death to persons on or around them and/or damage to property in their vicinity;
- the unpredictability of an equine's reaction to such things as sounds, sudden movements and unfamiliar objects, persons or other animals;
- certain hazards such as surface and subsurface objects;
- collisions with other equines, animals, people and objects (fixed or otherwise);
- limited availability of emergency medical care; and
- the potential of a participant or spectator to act in a negligent manner that may contribute to injury to the participant or others, such as failing to maintain control over the equine or to act within his/her ability.

Waiver of Liability: For the privilege of riding, handling, auditing, observing, and/or working around equines at the Maryland Horse Trials, LLC at Loch Moy Farm (hereinafter "MDHT") on the property of Carolyn Mackintosh and Loch Moy Farm, LLC (hereinafter "Loch Moy") today and on all future dates, I, on behalf of myself, my family members, my heirs, personal representatives, or assigns, do hereby agree to release, waive, and discharge MDHT and Loch Moy, and its members, managers, employees, volunteers, and agents from any liability or responsibility for accident, damage, injury, or illness to myself or any horse owned or leased by me, or to any family member or spectator accompanying me while on the premises of Loch Moy resulting from the inherent risks of equine activities or from the ordinary negligence (active or passive) of MDHT or Loch Moy.

AND that except in the event of MDHT, Carolyn Mackintosh or Loch Moy's gross and willful negligence, I agree not to bring any claims, demands, actions and causes of action, and/or litigation, against MDHT or Loch Moy for any economic and non-economic losses due to bodily injury, death, and/or property damage sustained by me in relation to the premises and operations of Loch Moy, including while riding, handling, or otherwise being near horses owned by or in the care, custody and control of MDHT, Carolyn Mackintosh, or Loch Moy.

Indemnification: I also agree to hold harmless, defend, and indemnify Carolyn Mackintosh, MDHT and Loch Moy (including, but not limited to, costs associated with defending a suit, judgment, courts costs, investigation costs, and reasonable attorney fees) from any and all claims of mine, my family members, or others arising from my injury or loss due to my participation as a rider, handler, or spectator.

I further agree to hold harmless, defend, and indemnify Carolyn Mackintosh, MDHT and Loch Moy against any and all claims of co-participants, rescuers, and others arising from my conduct in the course of my participation as a rider, handler, or spectator.

Acknowledgements, Assertions, and Agreements: I warrant that a full and fair disclosure of my equestrian handling and riding abilities have been made to MDHT, Loch Moy, and their agents. Further:

Health Status – I assert that I:

- Have fully disclosed any chronic conditions that could impair my ability to participate in equine activities and have provided a doctor's release permitting my participation (if applicable).
- Do not have any undisclosed chronic physical or mental conditions that would contra-indicate participation in equine activities.
- Possess sufficient physical fitness and skill to enable safe participation with, on, and around equines.

Emergency Care – I authorize or agree that MDHT or Loch Moy:

- May administer emergency first aid, CPR, and use an AED when deemed necessary.
- May secure emergency medical care or transportation (i.e., EMS) when deemed necessary.
- May share my medical history (if known) with emergency medical personnel when deemed necessary.
- And I shall assume all costs of emergency medical care and transportation provided on my behalf.

Rules & Safety Equipment – I agree:

- To abide by the rules and regulations established by MDHT and Loch Moy.
- To wear an SEI/ASTM approved riding helmet at all times while mounted on the horse, or warrant I understand the risk and danger of riding without a riding helmet and so choose not to wear a riding helmet.

(NOTE: Riders under 18 yrs of age may not waive the use of a riding helmet.)

- To wear appropriate footwear at all times while on the premises of Loch Moy.
- To inform MDHT or Loch Moy immediately if I become aware of rider conduct or equipment condition that presents a danger to my self or others.
- That MDHT and Loch Moy will conduct all activities in good faith and may find it necessary to terminate my participation if it is determined that I am incapable of safely meeting the rigors of the activity. I accept MDHT and Loch Moy's right to take such actions for the safety of myself, other riders, and/or the horses.

Covenant not to Sue; Mediation; Venue; and Severability Clauses: I covenant not to sue Carolyn Mackintosh, MDHT or Loch Moy for any present or future claim arising directly or indirectly from my participation with equines at Loch Moy Farm. This includes claims resulting from the inherent risks of equine activities and the active or passive negligence of Carolyn Mackintosh, MDHT, or Loch Moy.

This Agreement shall be construed and interpreted in accordance with the laws of the State of Maryland. Any action brought under this Agreement shall be brought within one (1) year of the incident or dispute giving rise to said claim. I further agree that *prior to litigation*, such incident or dispute shall first be mediated by a trained Mediator knowledgeable in equines and equine activities from a list acceptable to MDHT, Loch Moy, or Carolyn Mackintosh (whichever party is in dispute). Costs of mediation shall be shared equally by the parties. In the event of litigation, all parties agree to waive trial by jury and agree that the prevailing party shall be entitled to costs and fees associated with the litigation, including reasonable attorney fees.

I also expressly agree that this Participant Agreement is intended to be as broad and inclusive as permitted by the laws of the State of Maryland and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full force and effect.

Acknowledgement of Understanding: I understand this is a legal document and that I am signing this agreement freely and voluntarily. I understand I have the choice *not to participate* as a rider, handler, judge, assistant, volunteer, or spectator in the activity or event held at the facilities of Loch Moy Farm, and, therefore, not sign this Agreement.

I have read this 2-page Participation Agreement and fully understand its terms. I understand that I am giving up substantial rights, including my right to sue Loch Moy or MDHT, its clinicians, members, managers, employees, volunteers, and agents for injuries or death resulting from the inherent risks of equine activities or the active or passive negligence of Loch Moy Farm or MDHT. I further acknowledge that I intend my signature to be a complete and unconditional release of all liability, including that due to ordinary negligence by Loch Moy Farm or MDHT, to the greatest extent allowed by the laws of Maryland.

Facsimile and Emailed signatures shall be accepted as an original signature.

Date

Signature of Participant / Parent / Guardian
(must be at least 18yrs of age to sign) *

If participant is a minor, print name here

Printed Name of Signatory

Date of Birth of Minor Participant

Address

Name of Emergency Contact Person

City, State, Zip Code

Telephone of Emergency Contact Person

Telephone

Email Address

Email Address

*** If Participant is a minor (less than 18 years of age), the parental or guardian signature indicates full understanding of the above terms and, as may be permitted by law, is waiving both the rights of the minor participant and the rights of the parent/guardian pursuant to this Agreement.**

OFFICE USE:
Received by: _____

Agent (Print Name)

MDHT, 1235 Park Mills Road, Adamstown, Maryland 21710

Clinic Participant Competition Participant Schooling Participant Spectator or Auditor Volunteer

Name of Clinic, Seminar, Program, etc.



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 protective headgear when riding. When jumping, 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; 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 Preliminary Intermediate Advanced

Check appropriate box:

I am a 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.**)