

**Vancouver Island Working Equitation Presents**  
**Courtenay Working Equitation Show**

**Licensed Show and Clinic**

**June 1<sup>st</sup> & 2<sup>nd</sup>, 2024**

**June 3<sup>rd</sup>, 2024 (clinic)**

Licensed by

**WORKING EQUITATION CANADA**

Hosted by

**Vancouver Island Working Equitation**



## **Entries close May 17, 2024.**

Withdrawals will be accepted if medical issue with Doctor / Veterinarian letter is presented and a refund will be granted less administration fees. If withdrawal is requested at or after May 24th no refund will be granted.

## **Officials:**

Judge: Pam Vust Working Equitation Canada "B" Judge

Manager: Stella French, email: [viworkingequitation@gmail.com](mailto:viworkingequitation@gmail.com)

Show Secretary: Hilary Doucette, email: [viworkingequitation@gmail.com](mailto:viworkingequitation@gmail.com)

## **Location:**

The Comox Valley Exhibition Grounds

4839 Headquarters Rd, Courtenay, BC V9J 1P2

## **Event Schedule:**

Saturday June 1st Dressage All Levels, EOH for Children and Introductory riders

Sunday June 2nd EOH and Speed Rounds Level 2 Novice A – Level 5 Intermediate B and Advanced

Monday June 3<sup>rd</sup> Working Equitation Clinic with Pam Vust (separate entry and fees)

## **Competition Rules:**

The Courtenay Working Equitation Show is licensed by Working Equitation Canada (WECAN). The competition will follow Working Equitation Canada 2024 Rules. The rules and 2024 dressage tests can be found on the WECAN website: <http://www.workingeq.ca>

A horse/rider pair is considered an entry. A horse/rider entry may compete in only one Level per show. At licensed shows, a horse may be ridden a maximum of twice with different riders and the riders must be entered in different Levels. Exception: Two youths can share the same horse if competing in Children or Introductory Level 1.

Allowances for tack and attire are in the WECAN rules. Any tradition or discipline of tack is allowed within the parameters of WECAN rules.

Any breed of horse or mule is allowed to compete. Horse age restrictions do apply. Horses must be at least 4 years of age as of January 1st in the competition year to compete in Levels 1 to 2. A horse must

be at least 5 years of age as of January 1st in the competition year to compete in Levels 3, 4 and 5. A horse must be at least 6 years of age as of January 1st in the competition year to compete in Level 6.

Riders under 18 years of age must have permission to ride in the competition as indicated by a signature from their parent or guardian. All riders under 18 years of age must be accompanied by an adult.

Horses must be recorded with WECAN if you wish to have your results tracked. A Horse Recording Form is available on the WECAN website in the Members Area, List and Forms. Only recorded horses will have their scores tracked for qualification towards championships with WECAN.

All Riders and horse owners are required to have a current HCBC Membership as well as a WECAN membership.

All horses must wear their entry number while ridden anywhere on the show grounds.

Dressage test readers are allowed for Levels Children to L3 ONLY. Please note that the show will not be providing readers for these levels. However, the show would be happy to accept volunteers to read for competitors.

### **Facility Rules:**

Dogs must be on leash **at all times** and be well-behaved. Garbage cans will be provided on the show grounds. No Littering! Clean up after your horse anywhere on the show grounds. Additional rules will be posted at the show grounds.

### **Camping:**

Camping is available on site and is mandatory if your horse is stabled on the grounds. Please fill out camping details on entry form. Water and electricity is included with camping, park beside the big grey electric boxes to hook up.

### **Stabling:**

Overnight stalls and/or day stalls are available. Please fill out the stabling section on the entry form. Please provide water buckets, feed tubs and hay nets. Bring your own stable cleaning equipment. Stables must be fully cleaned before leaving the grounds. A \$40 stall cleaning deposit (cash or cheque) is required **at check in**, and will be returned once stall has been cleaned and inspected.

### **Prizes:**

Ribbons are awarded for 1st to 6th place in each Level with 7 or more riders and 1st to 4th in levels with 6 or less riders. Each trial for each Level will be awarded with 1st to 3rd placings. Points are also recorded by WECAN for Achievement and Milestone awards.

## Classes:

Class #	Level	Dressage	EOH	Speed
1	Children	X	X	
2	Level 1 Introductory	X	X	
3	Level 2 Novice A	X	X	X
4	Level 3 Novice B	X	X	X
5	Level 4 Intermediate A	X	X	X
6	Level 5 Intermediate B	X	X	X

**Note:** Children and Level 1 ride in the Dressage and Ease of Handling (EOH) Phases only.

## Entry information:

Only one class can be entered for each horse/rider combination.

**\*\*Only one entry per rider until March 17<sup>th</sup>, then additional rider entries will be added in order received. If desiring more than 1 entry per rider, please send all show forms at time of entry, and indicate which entry (s) to place on waitlist. Do not pay for additional entries until confirmed by show secretary after May 17<sup>th</sup>.\*\***

An entry is not considered complete until all fees; WECAN and HCBC numbers have been presented and have been paid. The Show Committee has the right to not accept any Entry. The number of entries accepted will be determined as entries are received. In the event of an entry being received after the show is full, those entrants will be notified and given the opportunity to be placed on a wait-list. Multiple entries per rider will be put on a waiting list until the closing date (**May 17 2024**). If there is room in the show riders will be allowed to enter multiple horses.

## Entries:

Email scanned entries to: Hilary Doucette, [viworkingequitation@gmail.com](mailto:viworkingequitation@gmail.com)

Send e-transfer for fees to [viworkingequitation@gmail.com](mailto:viworkingequitation@gmail.com)

Password is horses (lowercase). Please itemize what payment includes i.e. Show fee, Stall fees, Camping fee.

**Cancellation Policy:**

Withdrawals will be accepted if medical issue with Doctor / Veterinarian letter is presented and a refund will be granted less \$40.00 administration fees. If withdrawal is requested at or after May 24 no refund will be granted.

**Waivers:**

WECAN liability waiver must be signed; a guardian must sign for youth.

Youth must be accompanied by an Adult.

All riders must wear an ASTM approved helmet anytime they are mounted anywhere at the show.

**For more information:**

For show-related questions please contact: Stella French or Hilary Doucette at [viworkingequitation@gmail.com](mailto:viworkingequitation@gmail.com)

**Volunteers** would be greatly appreciated! Please contact Stella French if you would like to help as a volunteer.

**We are looking forward to seeing you for some serious fun!**

# Courtenay Working Equitation Show 2024

## Working Equitation Show Entry Form

June 1 & 2, 2024 The Comox Valley Exhibition Grounds	Show Licensed by Working Equitation Canada
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Registration (One per horse)

Name Of Rider: \_\_\_\_\_

HCBC Number: \_\_\_\_\_ WECAN Number: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Name Of Horse: \_\_\_\_\_ Breed: \_\_\_\_\_ Age: \_\_\_\_\_

Sex (Circle one) Mare    Gelding    Stallion    WECAN Horse Recording Number: \_\_\_\_\_

Owner (if not rider): \_\_\_\_\_ HCBC Number: \_\_\_\_\_ WECAN MBR Number: \_\_\_\_\_

Contact for Owner: Phone \_\_\_\_\_ Email: \_\_\_\_\_

Level Child \_\_\_\_\_ Level 1 Introductory \_\_\_\_\_ Level 2 Novice A \_\_\_\_\_ Level 3 Novice B \_\_\_\_\_

Level 4 Intermediate A \_\_\_\_\_ Level 5 Intermediate B \_\_\_\_\_

*(please checkmark beside your level)*

Note: only one class can be entered for each horse/rider combination

Office Use Only		Payment Items	Total Amount
HCBC #		Show fee- \$175.00	\$ _____
WECAN #		Stabling Fee Friday-\$25 per stall per night	\$ _____
Waivers		Stabling Fee Saturday-\$25 per stall per night	\$ _____
		Camping Fee Friday-\$30 per camp per night	\$ _____
		Camping Fee Saturday-\$30 per camp per night	\$ _____
		Total	\$ _____

Send e-transfer for fees to viworkingequitation@gmail.com Password is "horses" (lowercase).

## Working Equitation Clinic with Pam Vust

Vancouver Island Working Equitation is excited to offer this clinic June 3<sup>rd</sup>, 2024 at The Comox Valley Exhibition Grounds, 4839 Headquarters Rd, Courtenay, BC.

We are very excited to have a clinic opportunity with Judge Pam Vust following our WE show. Pam is registered as a "B" Basic Judge with Working Equitation Canada.

Name: \_\_\_\_\_ Horse's Name \_\_\_\_\_

Phone# \_\_\_\_\_ HCBC# \_\_\_\_\_ WE# \_\_\_\_\_

Email: \_\_\_\_\_ Address: \_\_\_\_\_

Age of horse: \_\_\_\_\_ Breed of Horse \_\_\_\_\_ Sex of horse \_\_\_\_\_

Current WE level of horse and rider \_\_\_\_\_

Pam would like to know your goals for the clinic \_\_\_\_\_

Clinic fee \$140 paid by e-transfer to viworkingequitation@gmail.com

Please note what the payment is for on the transfer. Password 'horses' (lowercase)

Clinic forms to be emailed to Hilary Doucette at viworkingequitation@gmail.com

Clinic Entry \$140

Auditing only \$25

Note: auditing is reserved for Working Equitation interest only. No videos or photos please unless with the permission of those riders participating.

Questions to Stella French viworkingequitation@gmail.com



# **Working Equitation Canada Équitation de Travail Canada**



## **EQUESTRIAN ACTIVITIES WAIVER AND RELEASE OF LIABILITY**

In consideration of being allowed to participate in any way in the WECan equestrian program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If however I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Working Equitation Canada, and their Chapters, officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
5. All participants in WECan Licensed Shows must be current WECan members

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Participant Signature

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

\_\_\_\_\_  
Witness Signature

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



**Working Equitation Canada  
Équitation de Travail Canada**



**FOR PARTICIPANTS OF MINORITY AGE**

(UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above.

\_\_\_\_\_  
Parent/Guardian Signature

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

\_\_\_\_\_  
Parent/Guardian Name (please print)

\_\_\_\_\_  
Emergency Contact Phone Number

\_\_\_\_\_  
Witness Signature

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