MPEC Dressage & Combined Training April Championship and Schooling Show SCDCTA Recognized 211051







4280 Ashley River Road Charleston, SC

AGREEMENT TO PRACTICE THE EVENT ORGANIZER COVID-19 MITIGATON PROTOCOL

We are all in this together and the situation requires that each and every one of us take personal responsibility for the health, safety, and welfare of ourselves, our family members, and our colleagues and peers in this environment. Whether participant, trainer, groom, event organizer and staff, or vendor and support personnel, we each need to exercise caution, take precautionary measures, be accountable, and utilize good judgement at all times while interacting with one another at competitions.

I agree to the following mitigation practices concerning COVID-19:

- I have taken my body temperature prior to entering the event grounds and my temperature is below 99.5° F (37.5° C).
- I have not exhibited symptoms of COVID-19 or been in contact with someone who has tested positive for COVID-19 within the last two weeks.
- I will wear a facemask or face covering OR maintain social distancing of six (6) feet. When mounted on a horse, a facemask or face covering is not required.

I understand the COVID-19 mitigation mitigation practices.	n practices outlined by the Event Organize	er and agree to comply with those	
*Signature	Print Name as Signed	Date	
Emergency Contact Name	Emergency Co	Emergency Contact Phone #	

*If the rider is 17 years of age or younger, the parent or guardian signs the agreement and is responsible for the practices listed for the minor.

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ENTRY FORM

Rider Name:		Jr/Yr	or Sr	SCDCTA Member #:	
Horse Name	Da	Date of Coggins (EIA) Report:SCDCTA Hors		SCDCTA Horse F	Reg. #
Rider Addres	s:				
Rider City/Sta	ate/Zip:				
Rider DOB if	entering Jr/YR classes:	Parent/Gua	ardian Name if ento	ering Jr/YR classes:	
Phone:	E	mail:			
Class #	Class Description				Fee
					\$
					\$
					\$
					\$
					\$
			(Class Fee(s) Sub-total	\$
		Off	ice Fee for Online	or Mailed entry - \$15	\$
			Office Fee if E	ntry is Emailed - \$20	\$
				er Apr. 5, 2021 - \$25	\$
		Guest	: Horse Fee – No Cl	asses Entered - \$25	\$
				Total	\$
I am aware t	LESS AGREEMENT: hat riding horses is an athletic ever	· ·			•
own or anyo Equestrian C	that I, or my horse, may be injured ne else due to the activity in which enter, Charleston Equestrian Center any other participants for any inju	o I am going to be er, LLC, Chalmers	engaged. I hereby Poston, Danielle H	agree to hold harmles untsman and any mer	ss Middleton Place mber therein, any
Rider (or Par	ent/Guardian) Signature:			Date:	

^{*}Parent/Guardian signature required for riders 17 yrs of age or younger.