



## Application for GDCTA Schooling Show Recognition

Name of Event/Show: \_\_\_\_\_

Date of Event/Show: \_\_\_\_\_

Location of Event/Show: \_\_\_\_\_

Type of Competition: \_\_\_\_\_ Dressage Show  
\_\_\_\_\_ Horse Trial / 3-Phase  
\_\_\_\_\_ Dressage Show and Combined Test

Judge(s): \_\_\_\_\_  
("L" graduate, "r" judge or higher)

Contact Person/ GDCTA Member: \_\_\_\_\_

Address of Contact: \_\_\_\_\_

Telephone of Contact: \_\_\_\_\_

Web page: \_\_\_\_\_

I hereby agree (1) to include a GDCTA membership form in the prize list and/or program; (2) to require the GDCTA Hold Harmless Clause for every entry; (3) to obtain/maintain liability insurance coverage for the show; (4) to post liability signs at all arenas and stabling, in accordance with the current Georgia statute; (5) to adhere to and enforce GDCTA policies for the conduct of schooling shows; (6) to adhere to and enforce USEF rules as reasonable in a schooling show environment; (7) to maintain a copy of the GDCTA policies and USEF rules for Dressage and/or Combined Training for reference in the show office during the event, and (8) to have available GDCTA Schooling Horse Show Evaluation forms for the participants (9) **GDCTA reserves the right to send a representative to your show without notice to insure contractual compliance.** I understand that failure to comply with all of GDCTA's requirements may result in future recognition not being granted.

Signed: \_\_\_\_\_

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

Send to: Carol Tresan, GDCTA Recognition POC  
1690 Julius Bridge Rd  
Ball Ground, GA 30107  
(404)786-4232  
Happy\_horses@hotmail.com