

Kismet Farms Driving Event 2026

In this document, you will find all the required forms that must be sent with your entry. If you are entering only one of the 2 shows, ignore forms for the other. Fill out one entry for each class.

Note that you may enter both a CT class and a CDE/DT class.

ADS entry form and liability waiver

USEF liability form & agreement form

Twin Rivers liability waiver

Kismet Farms liability waiver

Madeleine Augustsson Combined Driving liability waiver

Your groom/gator must also sign all liability waivers. If your groom/gator is not available to co-sign your waivers, please send waivers to him/her to print, sign and return via mail or email. Please do this in advance, it will make checking in at the show much simpler. Please put the driver's name on the groom/gator waivers. Missing waivers will lead to inability to start.

Fee summary form

Announcer form

USEF Vaccination Record form Use this form, or equivalent, to provide proof of Flu and Rhino vaccination within 6 months of the show. See ADS rule book Article 6.3 and USEF GR844 for what constitutes proof of vaccination.

Negative Coggins test certificate and health certificate required for out-of-state horses.

(It is understood that health paperwork may not be available at the time the entry form is sent in. Health forms may be emailed later but must be received before you arrive on the show grounds. Scan and email is fine.)

Pony Measurement Card Contact secretary if your pony needs to be measured.

Copy of USEF and/or ADS membership cards (or USEF showpass)

To enter the USEF show you must be a USEF member (or pay for a showpass online). Your equine must be registered with the USEF (this is free, if opting out of HOY Awards) and the horses owner must be a USEF member. Also confirm you are qualified to enter the class chosen, Refer to DC 908. If you have any further questions or need help, please contact the secretary.

Dispensation If you have a dispensation, please attach.

Golf Cart Contact secretary

Dogs must be on leash at all times.

Mail entry to: Gina Miner, 4008 Dyer Rd, Livermore
CA 94551

If emailing docs: vminer@me.com

Questions: 510-918-5800 call or text

Make check payable to **Tracy Bowman**

Please double-check that you have included all items listed above!



Kismet Farms Driving Event CDE/DT Entry Form

Driver: _____

ADS #: _____

Address: _____

USEF #: _____

Phone: _____

Email: _____

Jr B.O.D: _____

Division:

Beginner (USEF only) Training Preliminary Intermediate Advanced Hybrid (ADS only)

Class:

VSE Small Pony (joint class with Pony) Pony Horse

Turn out:

Single Pair Four-In-Hand Multiple (ADS only)

Show:

USEF CDE ADS DT

Horse Name	Age	Height	Sex	Color	Breed	USEF #

Owner: _____

Phone: _____

Address: _____

Email: _____

Nr of Stalls: _____ Stable with: _____ Arrival Day & Time: _____

Competitive Experience (list competitions that qualify you for the level you are entering):

Navigator: _____ Cellphone: _____ Email: _____

Permission For Minor To Show

I hereby consent to the entry of my child (name): _____ in this horse show and certify that I have read the foregoing representations and statements and that the same may be deemed a part thereof, and hereby accept responsibility thereunder for the participation of said minor.

Signature of Parent





Kismet Farms Driving Event CT Entry Form

Driver: _____

ADS #: _____

Address: _____

USEF #: _____

Phone: _____

Email: _____

Jr B.O.D: _____

Division:				
<input type="checkbox"/> Beginner (USEF only)	<input type="checkbox"/> Training	<input type="checkbox"/> Preliminary	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced Hybrid (ADS only)
Class:				
<input type="checkbox"/> VSE	<input type="checkbox"/> Small Pony (joint class with Pony)	<input type="checkbox"/> Pony	<input type="checkbox"/> Horse	
Turn out:				
<input type="checkbox"/> Single	<input type="checkbox"/> Pair	<input type="checkbox"/> Four-In-Hand	<input type="checkbox"/> Multiple (ADS only)	
Show:				
<input type="checkbox"/> USEF CT	<input type="checkbox"/> ADS CT			

Horse Name	Age	Height	Sex	Color	Breed	USEF #

Owner: _____

Phone: _____

Address: _____

Email: _____

Nr of Stalls: _____ Stable with: _____ Arrival Day & Time: _____

Competitive Experience (list competitions that qualify you for the level you are entering):

Navigator: _____ Cellphone: _____ Email: _____

<p>Permission For Minor To Show</p> <p>I hereby consent to the entry of my child (name): _____ in this horse show and certify that I have read the foregoing representations and statements and that the same may be deemed a part thereof, and hereby accept responsibility thereunder for the participation of said minor.</p> <p>_____</p> <p>Signature of Parent</p>



Kismet Farms Driving Event 2026 Fee Summary Form

CDE/DT Class:

BEG-TRN-PRE \$325 / INT- ADV Hybrid \$350 \$ _____

CT Class:

BEG-TRN-PRE-INT-ADV Hybrid \$275 \$ _____

discount entering both CDE/DT & CT class \$75 \$ - _____

Post Entry Fee (Postmarked after 4/24) \$50 \$ _____

Stall Fee \$190 (includes 1 bag shavings) \$ _____

additional shavings \$15/bag \$ _____

ADS Member Fee \$5 \$ _____

or ADS Non-Member Fee \$30 \$ _____

CA Drug Fee \$14/horse \$ _____

USEF Drug Fee \$25/horse \$ _____

Camping (electric & water hook-up, Thu-Sat night) \$240 \$ _____

no dry camping fee

Schooling Rounds (see separate sheet) \$ _____

Buy A Volunteers Lunch! (optional, \$10/each) \$ _____

Sponsorship (Any amount helps!) \$ _____

TOTAL: \$ _____

(Contact secretary for early arrival (before noon 5/14), extra nights \$40/night, schooling at facility \$75/day, paid separately)

Sharing Form

All sharing requests must be handed in with entryform or emailed to secretary by 5/11.
Requests will be taken into consideration if scheduling allows.

I'm sharing a carriage for dressage with: _____

I'm sharing a carriage for marathon with: _____

I'm sharing a carriage for cones with: _____

I'm sharing a groom for dressage with: _____

I'm sharing a navigator for marathon with: _____

I'm sharing a groom for cones with: _____

I have another scheduling conflict: _____

Dressage and Cones Schooling Rounds May 14th

Take the opportunity to school in the dressage arena and/or a practice a full cones course.

15 minutes in the dressage arena.

15 minutes in the cones course.

\$35 per slot or \$60 for two.

I'd like to school dressage for _____ (nr of slots) at _____ (what time)

I'd like to school cones for _____ (nr of slots) at _____ (what time)

Add the total to the fee summary sheet



The American Driving Society, Inc.

DRIVER & NAVIGATOR ADS DISCLAIMER and HOLD HARMLESS AGREEMENT

This form must be signed by every event participant or if a minor, their consenting parent, including each person who rides with a driver on a carriage not only during the actual event but including any time from arrival at the event to departure. I understand and agree that neither The American Driving Society, Inc. ("ADS") and its officers, directors, the driving event ("Event"), judges, officials, workers, volunteers or organizing committee, nor the property owners accept or shall have any responsibility of any nature whatsoever for accidents, damage, injury or illness to the horses, owners, riders, drivers, grooms, passengers, attendants, spectators or any other person or property in connection with this Event.

I hereby expressly agree without any limitation or condition for myself and my principals, representatives, employees, agents and assigns: (1) to be bound by the rules and bylaws of the ADS and any local rules of this Event; (2) that every horse, driver, attendant, groom and/or passenger is eligible as entered; and (3) to accept as final any decision of the Event officials on any question arising under the ADS rules and bylaws or any local rules of this Event. I also agree, without any limitation or condition, to hold the ADS, its officers, directors, employees and agents, and Event judges, officials and organizing committee, harmless from any and all liability, loss, claims or actions, causes of action, judgments or demands of any nature whatsoever. I am fully aware and appreciate that equine sports, including driving in this particular Event involve inherent dangerous risk of serious injury or death. By participating I do so voluntarily and expressly assume any and all risks of injury to me or loss of my horse(s) or equipment. I agree to release and voluntarily waive the right to sue the ADS, its officers, directors, employees, and agents, stewards, Event judges, personnel, volunteers, officials, and organizing committee, including their agents and employees from and against all claims for damages, including money damages, for any action taken or otherwise any harm caused by me or my horse to others, including whether arising from directly or indirectly from the negligence of the ADS or the Event.

I agree to indemnify and hold harmless the ADS its officers, directors, employees, clinicians, members, volunteers, coaches, representatives, assigns, Event judges, officials and organizing committee, their agents and employees from any and all claims for loss or injury caused by me or my horse that occur during or in conjunction with this Event.

I also agree that as a condition of and in consideration of acceptance of entry, the ADS and/or this Event may use or assign photographs, videos, audios, cablecasts, broadcasts, internet, film, new media or other likenesses of me and my horse taken during the course of this Event for the promotion, coverage or benefit of the Event, sport, or the ADS. BY SIGNING BELOW, I AGREE to be bound by all applicable ADS rules and all the terms and conditions of this AGREEMENT.

ALL PEOPLE LISTED BELOW MUST INCLUDE THE NAME AND PHONE NUMBER OF THEIR EMERGENCY CONTACT.

Name and Date of Event: _____ DRIVER Name: _____

DRIVER Signature: _____ Date: _____

(Parent/Guardian must sign if under 18)

Emergency Contact Name & Phone: _____

Groom/Navigator/Passenger/Attendant names, signatures & emergency contact name and phone numbers:

#1 Name: _____ Signature: _____ Date: _____

Emergency Contact Name & Phone: _____

#2 Name: _____ Signature: _____ Date: _____

Emergency Contact Name & Phone: _____

#3 Name: _____ Signature: _____ Date: _____

Emergency Contact Name & Phone: _____

#4 Name: _____ Signature: _____ Date: _____

Emergency Contact Name & Phone: _____

I have an ADS, FEI, or USEF Dispensation Certificate. (Attach a copy)



WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

For and in consideration of United States Equestrian Federation, Inc. dba US Equestrian ("USEF") allowing me, the undersigned, to participate in any capacity (including as a rider, driver, handler, vaulter, longeur, lessee, owner, agent, coach, official, trainer or volunteer) in a USEF sanctioned, licensed or approved event or activity, including but not limited to equestrian clinics, practices, shows, competitions and related or incidental activities and _____ ("USEF Event" or "USEF Events"); I, for myself, and on behalf of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns, hereby agree to and make the following contractual representations pursuant to this Agreement (the "Agreement"):

A. RULES AND REGULATIONS: I hereby agree that I have read, understand, and agree to be bound by all applicable Federation Bylaws, rules, and policies including the USEF Safe Sport Policy and Minor Athlete Abuse Prevention Policies (MAAPP) as published at www.usef.org, as amended from time to time.

B. ACKNOWLEDGMENT OF INHERENT RISKS: I understand and acknowledge that equine activities, including but not limited to horseback riding and equestrian sport, are rugged adventure recreational sports and I knowingly, willingly, and voluntarily acknowledge the inherent risks associated with equine activities and know that these activities are inherently dangerous, and that participation in any USEF Event involves risks and dangers including, without limitation, the potential for serious bodily injury (including broken bones, head or neck injuries), sickness and disease (including communicable diseases), trauma, pain & suffering, permanent disability, paralysis and death; loss of or damage to personal property (including my mount & equipment) arising out of the unpredictable behavior of horses; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with other participants and horses, natural or manmade objects; adverse weather conditions; facilities issues and premises conditions; failure of protective equipment (including helmets); inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of the USEF Event organizers and competition management; and other undefined, not readily foreseeable and presently unknown risks and dangers ("Risks").

EQUINE ACTIVITY LIABILITY ACT WARNING:

CAUTION: HORSEBACK RIDING AND EQUINE ACTIVITIES CAN BE DANGEROUS. RIDE AT YOUR OWN RISK.

Under the laws of most States, an equine activity sponsor or equine professional is not liable for any injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities.

C. ASSUMPTION OF RISK: I understand that the aforementioned Risks may be caused in whole or in part or result directly or indirectly from the negligence of my own actions or inactions, the actions or inactions of others participating in the USEF Events, or the negligent acts or omissions of the Released Parties defined below, and I hereby voluntarily and knowingly assume all such Risks and responsibility for any damages, liabilities, losses, or expenses that I incur as a result of my participation in any USEF Events. I also agree to be responsible for any injury or damage caused by me, my horse, my employees or contractors under my direction and control at any USEF Event.

D. WAIVER AND RELEASE OF LIABILITY, HOLD HARMLESS AND INDEMNITY: In conjunction with my participation in any USEF Event, I hereby release, waive and covenant not to sue, and further agree to indemnify, defend and hold harmless the following parties: USEF, USEF Recognized Affiliate Associations, the United States Olympic & Paralympic Committee (USOPC), USEF clubs, members, Event participants (including athletes/riders, coaches, trainers, judges/officials, and other personnel), the Event owner, licensee, and competition managers; the promoters, sponsors, or advertisers of any USEF Event; any charity or other beneficiary which may benefit from the USEF Event; the owners, managers, or lessors of any facilities or premises where a USEF Event may be held; and all directors, officers, employees, agents, contractors, and volunteers of any of the aforementioned parties (**Individually and Collectively, the "Released Parties" or "Event Organizers"**), with respect to any liability, claim(s), demand(s), cause(s) of action, damage(s), loss, or expense (including court costs and reasonable attorney fees) of any kind or nature ("**Liability**") which may arise out of, result from, or relate in any way to my participation in the USEF Events, including claims for Liability caused in whole or in part by the negligent acts or omissions of the Released Parties.

E. COMPLETE AGREEMENT AND SEVERABILITY CLAUSE: This Agreement represents the complete understanding between the parties regarding these issues and no oral representations, statements or inducements have been made apart from this Agreement. If any provision of this Agreement is held to be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Agreement and shall not affect the validity and enforceability of any remaining provisions.

I HAVE CAREFULLY READ THIS DOCUMENT IN ITS ENTIRETY, UNDERSTAND ALL OF ITS TERMS AND CONDITIONS, AND KNOW IT CONTAINS AN ASSUMPTION OF RISK, RELEASE AND WAIVER FROM LIABILITY, AS WELL AS A HOLD HARMLESS AND INDEMNIFICATION OBLIGATIONS.

By signing below, I agree that I have read, understand, and agree to be bound by all applicable Federation Bylaws, rules, and policies including the USEF Safe Sport Policy and Minor Athlete Abuse Prevention Policies (MAAPP) as published at www.usef.org, as amended from time to time. Further, by signing below, I (as the participant or as the Parent/Legal Guardian of the minor identified below) hereby accept and agree to the terms and conditions of this Agreement in connection with my (or the minor's) participation in USEF Events. If, despite this Agreement, I, or anyone on my behalf or the minor's behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liabilities as the result of such claim.

The parties agree that this agreement may be electronically signed. The parties agree that the electronic signatures appearing on this agreement are the same as handwritten signatures for the purposes of validity, enforceability, and admissibility.

RIDER/DRIVER/HANDLER/VAULTER/LONGEUR OWNER TRAINER OFFICIAL STAFF VOLUNTEER COACH (IF APPLICABLE) OTHER

Signature: _____ Date: _____ Print Name: _____

Parent/Guardian Signature: (Required if Rider/Driver/Handler/Vaulter/Longeur is a minor) _____ Date: _____

Print Parent//Guardian Name: _____ Emergency Contact Phone No. _____ 02.18.26



FEDERATION ENTRY AGREEMENT

By entering a Federation-licensed Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaulteur or Longeur and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the Bylaws and Rules of the United States Equestrian Federation, Inc. (the "Federation") and the local rules of _____ (Competition). I agree to be bound by the Bylaws and Rules of the Federation and of the competition. I will accept as final the decision of the Hearing Committee on any question arising under the Rules, and agree to release and hold harmless the competition, the Federation, their officials, directors and employees for any action taken under the Rules. I represent that I am eligible to enter and/or participate under the Rules, and every horse I am entering is eligible as entered. I also agree that as a condition of and in consideration of acceptance of entry, the Federation and/or the Competition may use or assign photographs, videos, audios, cable - casts, broadcasts, internet, film, new media or other likenesses of me and my horse taken during the course of the competition for the promotion, coverage or benefit of the competition, sport, or the Federation. Those likenesses shall not be used to advertise a product and they may not be used in such a way as to jeopardize amateur status. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to compensation, invasion of privacy, right of publicity, or to misappropriation. The construction and application of Federation rules are governed by the laws of the State of New York, and any action instituted against the Federation must be filed in New York State. See GR907.4.

If not currently a USEF Active Competing member or Subscriber and competing only in classes that are exempt from membership requirements, I acknowledge and agree that I will be enrolled at no cost as a USEF Fan and my USEF Fan Account will continue to annually automatically renew unless and until USEF determines in its sole discretion to terminate my Fan account. Additionally, I acknowledge that the benefits of a USEF Fan are subject to change without notice. I acknowledge that I may opt out at any time by going to My USEF Dashboard or calling (859) 810-8733.

BY SIGNING BELOW, I AGREE that I have read, understand, and agree to be bound by all applicable Federation Bylaws, rules, and policies including the USEF Safe Sport Policy and Minor Athlete Abuse Prevention Policies (MAAPP) as published at www.usef.org, as amended from time to time, as well as all terms and provisions of this Prize List. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same validity, force and effect as if I affixed my signature by my own hand.

RIDER/DRIVER/HANDLER/VAULTER/LONGEUR (mandatory)
Signature: _____
Print Name: _____

OWNER/AGENT (mandatory)
Signature: _____
Print Name: _____

TRAINER (mandatory)
Signature: _____
Print Name: _____

COACH (if applicable)
Signature: _____
Print Name: _____

Parent/Guardian Signature: (Required if Rider/Driver/Handler/Vaulteur/Longeur is a minor) _____
Print Parent//Guardian Name: _____ Emergency Contact Phone No. _____

Is Rider/Driver/Vaulteur a U.S. Citizen: Yes No

Twin Rivers Ranch Release Form (Please sign in every time you ride)

Name of Rider: _____ Rider DOB: _____

Rider Address: _____

Name of Trainer: _____ Rider Email Address _____

Cell Phone: _____

1. The undersigned Owner/Rider/Student/Parent or Guardian shall abide by all rules and regulations of Twin Rivers Ranch. If I have not seen the rules and regulations it is my responsibility to find them. _____ Initial here
2. The undersigned Owner/Rider/Student/Parent or Guardian shall assume all responsibility and risk arising out of engaging in or participating in equestrian activities at Twin Rivers Ranch. The undersigned Owner/Rider/Student/Parent or Guardian shall hold Twin Rivers Ranch, Whirlwind Excavating, Jeff and Connie Baxter, their agents and employees or any family members harmless from all damages or liability for and injury to person, injury to horse, damage to personal property or for wrongful injury or death caused by negligence. _____ Initial here
3. The undersigned Owner/Rider/Student/Parent or Guardian does for him/herself, his/her heirs, executors, administrators, and assigns hereby release, waive, discharge and relinquish any action or causes of action, aforesaid, which may hereafter arise for him/herself and for his/her estate, and agrees that under no circumstances will he/she or his/her heirs, executors, administrators and assigns prosecute, present any claim for personal injury, property damage or wrongful death against Jeff Baxter, Connie Baxter their agents and employees or any family member for any of said causes of action, whether the same shall arise by the negligence of any person or otherwise. (This means you will not sue us or any employee, agent or family member for any reason at any time even if we are negligent.) _____ Initial here.
4. The undersigned will by signing this document promise to indemnify Jeff and Connie Baxter for any and all damages, verdicts, judgments, expenses, costs and attorney fees which they may incur in defending themselves against such claims. The undersigned will by signing this document promise to indemnify Jeff and Connie Baxter for any and all damages, verdicts, judgments, expenses, costs and attorney fees that they may incur in defending themselves against such claims even if Jeff and Connie Baxter are found guilty or negligent. _____ Initial here.
5. The undersigned acknowledges that he/she has read the foregoing paragraphs, has been fully and completely advised of the potential dangers incidental to engaging in equestrian activities and is fully aware of the legal consequences of signing the within instrument.
6. Covid 19: I understand that a human virus is in this community and I am participating with all risk on myself. _____ initial here
7. Covid 19: I will take my own temperature each day and not come on any public grounds if my temp is over 99.5. I agree to show proof of my health and temp each day if requested. _____ initial here
8. DAMAGES to facility- any damages caused to the facility will be fined. _____ initial here
9. Late Payment Fee- \$50 fee if not paid before you leave the property! _____ initial here

Rider Signature: _____ **Date:** _____

Parent or Guardian Signature: _____ **Date:** _____

Trainer / Group You're with today: _____ **Barn#** _____ **Stall#** _____
 XC/dressage/jump/trail/hacking/galloping/driving \$75 x _____ day x _____ horses=\$ _____
 Stall use/day \$40x _____ day x _____ horses=\$ _____ (TRR member's rate \$35/day)
 Shavings (ask for current price) \$15 x _____ bags =\$ _____
 RV hookup/Water Only \$80 / \$35 x _____ nights=\$ _____

Total \$ _____ paid CASH, CHECK, or VENMO # _____, or Annual Membership
 Venmo payments to @connie-baxter-2 (**\$50 Late payment fee if not paid before leave grounds!**)



USE AGREEMENT AND LIABILITY RELEASE

(PLEASE READ CAREFULLY)

This agreement, dated [REDACTED] is made between Madeleine Augustsson Combined Driving LLC (or MACD), and [REDACTED] (print your name).

WHEREAS, I understand and acknowledge that activities involving horses ("Equine Activities"), including but not limited to the mounting, riding, driving, 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 services from Madeleine Augustsson Combined Driving and the facilities of Sugarland Ranch 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 Sugarland Ranch or elsewhere while working with an MACD equine professional, unless such bodily injury or property damage is attributable in full or in part to the gross negligence of MACD. 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 may have been lost, stolen, 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 Madeleine Augustsson Combined Driving LLC and Sugarland Ranch, including any of its owners, occupants, tenants, subtenants, employees, officers, directors, or agents and their respective affiliates or persons 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 the premises.

(b) I acknowledge that MACD requires me to wear AHSA approved headgear with a chin strap while jumping and driving obstacles. MACD requires a minor (under 18 years of age), to wear such headgear at all times when riding or driving horses. I understand and acknowledge that the risk of head injuries and death are significantly reduced by wearing appropriate headgear. I hereby release, waive Madeleine Augustsson Combined Driving LLC and Sugarland Ranch, 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, 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 Sugarland's premises or at an offsite facility.

(c) This release is intended to release, waive and discharge, in advance, Madeleine Augustsson Combined driving LLC and Sugarland Ranch 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 premises or in any activity in which an MACD representative is required to attend on my behalf, and/or my or my guests or invitees presence on the Sugarland Ranch 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.

Initial this page ([REDACTED])

(d) Medical Authority. I, (participant, or if minor, parents/guardians) hereby grant permission and authority to MACD, 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 MACD 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 Sugarland Ranch facilities, I promise not to sue or demand any money or anything else of value from Madeleine Augustsson Combined Driving LLC and Sugarland Ranch, and their respective affiliates or persons of any one or more of them.

3. Indemnification. I agree to completely indemnify and hold harmless Madeleine Augustsson Combined Driving LLC and Sugarland Ranch, 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.

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 in personam jurisdiction of the State of California. Venue for purposes of any litigation or arbitration concerning this Agreement shall be in Yolo 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

SIGNATURE OF PARTICIPANTS PARENT

DATE

OR LEGAL GUARDIAN

OR LEGAL GUARDIAN

PARTICIPANTS ADDRESS IN FULL

HOME PHONE

WORK PHONE

CELL PHONE

PERSON TO CONTACT IN CASE OF EMERGENCY RELATIONSHIP

PHONE #1

PHONE #2

ENTRY NUMBER

Kismet Farms Driving Event 2026

ANNOUNCER FORM

(please print very clearly and use big letters!)

Name of Competitor: _____

City: _____

Owner (if different): _____

Division/Class: _____

Make and Model or Type of Carriage: _____

Dressage & Cones: _____

Marathon: _____

How long have you participated in CDEs? _____

What got you started competing in CDEs? _____

NAME OF EQUINE(S)	HEIGHT	BREED	AGE	COLOR	GENDER

Any special stories about your equine(s)? _____

Name of Groom/Navigator: _____

City: _____

Any special stories about your groom/navigator? _____

Anything else? _____

