



Great American Insurance Group/USDF Breeder Championship Series Finals

HOST SITE APPLICATION FOR THE COMPETITION YEAR 2012

Applicant Name: _____ Date: ____/____/____

Position: _____ Phone: (____) _____ - _____ Fax: (____) _____ - _____

E-mail: _____

If you are interested in hosting a Great American Insurance Group/USDF Breeder Championship Series Final, complete this form and return it to the USDF office. Applications will be reviewed by the working group appointed by the USDF Sport Horse Committee. All applications must be received by October 1 of the year prior to the championship.

Host Site Applicant:

Please complete this application in detail, and send it directly to the USDF Office by no later than October 1 of the year prior to the championship. You are strongly encouraged to attach additional information to this application, including diagrams of the facility and any other information that enhances your bid. All sections must be completed. Prior to submitting this form, the applicant must be familiar with the current USEF and USDF Breeder Series Championship Program Rules. Once an application has been submitted, no changes to facility, organizer (including licensee), manager or secretary may be made without prior notification and written consent of both USDF and the Sport Horse Committee. In addition, USDF reserves the right to select an alternate host site and management if the facility, organizer (including licensee), manager or secretary named in the original host site application is changed without written permission from USDF. If any position is tentative at the time of submission, it must be indicated on the application. Once these positions are assigned, written notice must be made to the USDF office.

Competition Information

What is your USDF Region? _____

What is your USDF Breeders Championship Series? _____

Will a GMO be sponsoring or supporting this USDF Breeder Championship Final? Yes _____ No _____

If so, name GMO: _____

Who will be the Competition Licensee as defined by USEF GR131? (USDF Regions cannot be USEF Competition Licensees).

Name of Authorized Representative for Competition Licensee: _____

Address: _____

City/State/Zip Code: _____

E-mail: _____ Fax: (_____) _____ - _____

Day phone: (_____) _____ - _____ Eve phone: (_____) _____ - _____

Date of Competition: _____ / _____ / _____ USEF Level of Competition: (must be minimum Level 2): _____

If show has already received USEF license/USDF recognition, provide the following: (Note: Competition must be USEF-licensed/USDF recognized at least six months prior to the actual date)

USEF Recognition #: _____ USDF Recognition#: _____

Management

Both Competition Manager and Competition Secretary must be USEF Senior Active or Life Members and Manager must be USDF Participating (PM) or Group (GM) member at the time of the championships.

Competition Manager: _____

Address: _____

City/State/Zip Code: _____

E-mail: _____ Fax: (_____) _____ - _____

Day phone: (_____) _____ - _____ Eve phone: (_____) _____ - _____

Describe experience of Competition Manager (include the number of years, number and size of Dressage Competitions with DSHB classes managed): _____

Name of Breeder Championship Competition Secretary: _____

Address: _____

City/State/Zip Code: _____

E-mail: _____ Fax: (_____) _____ - _____

Day phone: (_____) _____ - _____ Eve phone: (_____) _____ - _____

Describe experience of Competition Secretary (include the number of years, number and size of Dressage Competitions with DSHB classes secretaried): _____

Facility

You must include a map of the facility layout with this application along with a layout of the main competition arena(s) and other competition arenas, holding areas, warm up and lunging areas.

Name of Facility: _____

Address: _____

City/State/Zip Code: _____

Location: Is this facility accessible by major highway? Yes _____ No _____

Number of arenas: Indoor: _____ Covered: _____ Outdoor: _____

List the dimensions and entry/exit layout to be used for USDFBC Finals classes, type of footing and type of markers used for layout of triangle in each ring. *In gate and out gate must be separate or traffic of horses carefully controlled for safety.*

Number and dimensions of warm-up or holding rings/areas:

Number _____ Dimensions: _____

Must provide separate warm-up and holding areas for fillies/mares and colts/stallions.

Number and dimensions of lungeing rings/areas:

Number _____ Dimensions: _____

Must make provisions for separate lungeing areas/times for fillies/mares and colts/stallions. Lungeing areas/rings must be separate from holding/warm-up areas for DSHB horses.

Please provide an accurate assessment of the effect of severe weather on your rings and potential for alternate planning:

List the number and size of Dressage Sport Horse Breed Competitions held at this facility (include names, dates, and numbers of horses): _____

Describe stabling available and/or that will be provided (be sure to note stall size and type, water and electrical availability, sound system, doors, flooring (i.e. are the floors concrete, dirt, etc?)) : _____

Describe the show office facilities (allocation of space, electricity, location, etc.): _____

How will feed/hay/shavings be provided? _____

Describe parking facilities for vehicles and trailers: _____

Arena Maintenance:

Describe how the competition and warm-up/holding rings will be maintained throughout the competition: _____

Staff

Name of Safety Coordinator: _____

Experience: _____

Name of Awards Coordinator: _____

Experience: _____

Name of Professional Photographer: _____

Competition Officials

List proposed (invited) judges and their ratings, include foreign FEI judges or foreign breed experts that guest cards will be applied for: _____

Name of proposed (invited) USEF Technical Delegate _____

List the TD Experience officiating DSHB Shows: _____

Name of Official Veterinarian: _____

Name of Medical Personnel (see USEF GR1211.5): _____

Awards Ceremonies

Describe organization of awards ceremonies, including scheduling, safety plans, photo opportunities with USDF and Sponsor banners, announcements during ceremonies, etc.: _____

Amenities

What food services are available on the grounds? _____

Are hotels close by? Yes _____ No _____ How far (miles)? _____

Are there camper facilities on the grounds? Yes _____ No _____

Sound System:

Does PA system cover all competition and warm-up areas? Yes _____ No _____

Does PA system cover stabling area? Yes _____ No _____ Entire Grounds? Yes _____ No _____

Describe radio/electronic communication between key personnel: _____

I certify that I have read the current USDF Breeder Championships Program Rules and that as the Competition Licensee I agree to abide by all rules, requirements and conditions listed therein. I also certify that the above information is accurate and complete to the best of my knowledge.

Name of Competition Licensee:

Authorized Representative of Competition Licensee:

Print Name: _____ Title: _____

Signature _____ Date: _____

Address: _____

Phone: (_____) _____ - _____ E-mail: _____

I certify that I have read the current USDF Breeder Championships Program Rules and that as the Competition Manager, I agree to abide by all rules, requirements and conditions listed therein. I also certify that the above information is accurate and complete to the best of my knowledge.

Name of Competition Licensee:

Competition Manager:

Print Name: _____

Signature _____ Date: _____

Address: _____

Phone: (_____) _____ - _____ E-mail: _____

After signing this Host Site Application, send this application to:

United States Dressage Federation

Attn: USDF Breeder Championships

4051 Iron Works Parkway

Lexington, KY 40511

Questions: Please contact Donna Rocchetti at the USDF office: (859) 271-7896, (859)971-7722 (fax), or email drocchetti@usdf.org

USDF OFFICE USE ONLY

Date application received by USDF Office: ____/____/____

Date application sent to Sport Horse Committee Working Group: ____/____/____

Date feedback sent to Sport Horse Committee Chair: ____/____/____

Date feedback sent to Regional Director: ____/____/____

Date application approved as host site: ____/____/____ Not selected: ____

Date applicant notified: ____/____/____

Date contract issued (if applicable): ____/____/____