



Edmonton Area Alberta Dressage Association Competitions Program Application – 2022

One Form per show

Development of dressage athletes relies on having access to competitions to allow constructive feedback to the athlete. The competitions program is designed to assist organizers in offering a variety of levels of shows in the Edmonton Area.

The Program

- 1) Shows in the Edmonton area may apply for maximum funding as follows:
 - a. Equine Canada Discovery Shows - \$25/day
 - b. Equine Canada Bronze Shows - \$75/day
 - c. Equine Canada Silver Shows - \$175/competition
 - d. Equine Canada Gold Show - \$250/competition
 - e. Equine Canada Platinum Show - \$500/competition
- 2) The monies payable to the show will be determined by the EAADA Board based on the financial health of EAADA during that fiscal year. There are no guarantees of any monies being payable.
- 3) If the show is cancelled for any reason, the monies are to be returned to the EAADA.
- 4) In order to be eligible the following criteria must be met:
 - a. The show manager must be an EAADA member in good standing
 - b. The show must be open to all EAADA members
 - c. The show must be advertised on the EAADA and ADA website
 - d. Display the EAADA banner in a prominent place
 - e. The show must be in the Edmonton Area
 - f. The show must not be subsidized by another ADA member association
 - g. If requested, allow the EAADA to set up a display to advertize the club and its events.
 - h. List the EAADA as a supporter in any show material produced

The Application for Funding must be received within 3 weeks after the show.

All applications can be mailed/emailed to:

EAADA Subsidy Coordinator
4715 43 Avenue NW, Edmonton, AB, T6L 6L9
Email: subsidies@eaada.ca



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| Show Manager's Name | |
| Show Manager's EAADA # | |
| Name of Show | |
| Dates of Show | |
| Facility Name & Address | |
| EC Level of Show | |
| Funding Request Amount | |
| EC License | Attach a copy |
| # of Riders in the show | |
| How was the EAADA recognized for their support? | |

I, _____ (Show Manager) acknowledge that the program requirements have be followed.

Signature of Show Manager

OFFICE USE ONLY: DATE RECEIVED _____

APPROVAL DATE _____ **Approved: Yes No**