



DRESSAGE/PARA-DRESSAGE DISPENSATION CERTIFICATE INFORMATION

The Equestrian Canada (EC) Dressage/Para-Dressage Dispensation Certificate allows athletes with a physical and/or sensory impairment to compete at EC sanctioned dressage competitions with the use of compensating (adaptive) aids.

It is very important that you take the opportunity to read through this document, as it has detailed information on the use of compensating aids at EC dressage competitions.

Compensating (Adaptive) Aids

Compensating (adaptive) aids are used by athletes to compensate for physical limitations resulting from an impairment and enable them to ride a horse. For example, a hand hold on the front of the saddle enables someone with a high-level spinal cord injury to balance safely on a horse.

A compensating aid is not to be used to compensate for lack of riding skill or provide an advantage to enhance the horse's performance – this would be considered a training aid. The well-being of the horse is paramount in considering the use of any compensating aid.

It is the responsibility of each athlete and coach to ensure all compensating aids used in competition have been documented correctly on the athlete's EC Dressage/Para-Dressage Dispensation Certificate and are approved by the EC Para-Dressage Department.

Athletes With an Impairment

Athletes with an impairment may compete in both able-bodied dressage competitions and in para-dressage specific classes.

- Athletes with an impairment who use compensating aids and are competing in EC Bronze level dressage shows must have an EC Dressage/Para-Dressage Dispensation Certificate that identifies the compensating aid(s) that they are permitted to use in competition.
- Athletes with an impairment who use compensating aid(s) and are competing in EC Silver or Gold level dressage shows must have an EC classification profile or a copy of the current EC Classification Master List that identifies the compensating aid(s) that they are permitted to use in competition.

Note: Classified athletes competing in EC Bronze level dressage shows are permitted to compete with additional compensating aid(s) given the athlete has an EC Dressage/Para-Dressage Dispensation Certificate that specifically lists the compensatory aid(s).

Exception: Athletes with hearing loss only may use the EC Dressage/Para-Dressage Dispensation Certificate at EC Bronze, Silver and Gold level dressage competitions. The compensating aid allowed for hearing impairment is a two-way communication device, provided that the athlete uses only one earpiece to enable them to hear any directions from the steward. Athletes with documented hearing impairment may also use headsets if the competition organizer is able to provide a supervisor to stand with the caller. An EC Dressage/Para-Dressage Dispensation Certificate indicating the athlete's hearing impairment must be submitted with the competition entry and the steward and judge must be advised.



EC Dressage/Para-Dressage Dispensation Guidelines

1. An athlete who uses compensating aid(s) must have either an EC Dressage/Para-Dressage Dispensation Certificate (Bronze competitions only) or EC classification profile that identifies the compensating aid(s) that they are permitted to use in competition.
2. The EC Dressage/Para-Dressage Dispensation Master List provides the athlete name, approved compensating aids and expiry date. The EC Dressage/Para-Dressage Dispensation Master List will be used for Bronze level competitions only.
3. Athletes must submit copies of their EC Dressage/Para-Dressage Dispensation Certificate and/or a copy of the EC Dressage/Para-Dressage Dispensation Master List with their entries and carry copies with them at all times while on the competition grounds.
4. Competition organizers must notify official(s) before the start of the competition that there is an athlete who will be competing with compensating aids and provide them with a copy of the EC Dressage/Para-Dressage Dispensation Certificate and/or a copy of the EC Dressage/Para-Dressage Dispensation Master List.
5. The competition steward(s)/official(s) have the right and responsibility to inspect the compensating aids and declare whether a compensating aid is unsafe for the horse and/or athlete. The athlete must be able to fall free from the horse at all times.
6. If electronic communication is listed on the athlete's EC Dressage/Para-Dressage Dispensation Certificate or the EC Dressage/Para-Dressage Dispensation Master List, the person communicating to an athlete in the ring must sit next to a competition official.
7. Classified para-dressage athletes with a physical and/or visual impairment who require compensating aids and are competing at EC sanctioned Bronze dressage competitions will be required to submit a EC Dressage/Para-Dressage Dispensation Certificate with their entries for each show and they must be listed on the EC Dressage/Para-Dressage Dispensation Master List.
8. At the Bronze level, athletes may compete at the Grade they feel most comfortable performing in. However, athletes are encouraged to compete at the highest level of their ability.
9. Should an athlete not apply for a renewal within two (2) months of their dispensation certificate expiring, the athlete will be placed on the inactive list.

Completion of the EC Dressage/Para-Dressage Dispensation Certificate

1. An athlete who has not been classified must review and discuss with their coach the need for compensating aids to determine which aids would be required and suitable for the athlete. For a list of approved aids, please visit the EC website [here](#). The athlete's physician must complete and sign the Diagnosis Information Form included in the EC Dressage/Para-Dressage Dispensation Application Form.
2. The athlete must submit the completed EC Dressage/Para-Dressage Dispensation Certificate Application Form to the EC Para-Dressage Department. All application information must be completed.
3. A copy of the application will remain at the EC office on file and will not be shared publicly. It is not required to be submitted when entering competitions.



4. It is the responsibility of each athlete to ensure all compensating aid(s) they use in Bronze level competition have been documented correctly on their EC Dressage/Para-Dressage Dispensation Certificate. If an aid is not listed on the certificate, the athlete is not permitted to use that aid.
5. The EC Dressage/Para-Dressage Dispensation Certificate application is valid until the expiry date listed of the certificate.
6. The Para-Dressage Classification Advisory Committee reviews each EC Dressage/Para-Dressage Dispensation Certificate application and will determine if the request for compensating aids is accepted.
7. The Para-Dressage Classification Advisory Committee may request additional supporting documentation prior to approval of the athlete's certificate of dispensation application.



EC DRESSAGE/PARA-DRESSAGE DISPENSATION CERTIFICATE APPLICATION FORM (Page 1 of 6)

This form is to be completed by athletes who require an Equestrian Canada (EC) Dressage/Para-Dressage Dispensation Certificate to compete in EC Bronze level competitions

It is the responsibility of the athlete to request, in writing, a new or renewed EC Dressage/Para-Dressage Dispensation Certificate through this application. Applications or renewals for EC Dressage/Para-Dressage Dispensation Certificates should be submitted prior to the expiry date. All dispensation certificates expire annually.

The Para-Dressage Classification Advisory Committee approves all EC Dressage/Para-Dressage Dispensation Certificates applications.

Physical impairment classification is available to athletes who meet the minimal impairment criteria as outlined in the FEI classification rules.

ALL SECTIONS OF THIS FORM MUST BE COMPLETED. PLEASE PRINT CLEARLY.

Dr. Mr. Mrs. Miss Ms.

First Name: _____ **Last Name:** _____

Street Address: _____

City: _____ **Province/State:** _____ **Postal Code:** _____

Phone: (_____) _____ - _____ **Email:** _____

EC Sport Licence Number: _____

Date of Birth: ____/____/____ (DD/ MM /YYYY)

Name of Coach: _____ **Name of Riding Centre:** _____



EC DRESSAGE/PARA-DRESSAGE DISPENSATION CERTIFICATE APPLICATION FORM (Page 2 of 6)

Briefly explain your medical impairment and how it affects you in everyday living skills (e.g. strength, mobility, etc.):

The athlete may use approved compensating aids including special equipment needed to ride a horse. The special equipment must not give them an advantage over other athletes. All athletes should be encouraged to ride with as few aids as possible.

Standard Compensating Aids: Salute with head only, sitting or rising trot, gloves, spurs, any type of saddle, soft hand hold, deep saddle, elastic bands on stirrups, enclosed stirrups, magnetic stirrups, one (1) whip, breast plate and/or neck strap, split rein on double bridle, elastic inserts in reins, safety vest (including inflatable)

Please reference the [FEI Para-Dressage Compensating Aids Photo List](#) and the [FEI Classifiers Manual](#) Section 15 - Compensating aids for para-equestrian.

List all compensating aids you are requesting, including standard compensating aids:

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EC DRESSAGE/PARA-DRESSAGE DISPENSATION CERTIFICATE APPLICATION FORM (Page 3 of 6)

- I, the athlete, have filed the EC Dressage/Para-Dressage Dispensation Application Form with Equestrian Canada (EC).
- I understand that I am applying for renewal of my EC Dressage/Para-Dressage Dispensation Certificate for EC sanctioned para-dressage and dressage competitions.
- I agree and consent to EC maintaining and processing my personal data in any format, including my full name, date of birth, discipline, relevant medical information and documentation.
- I agree and consent to my name and approved compensating aids being published by EC and shared with third parties such as competition organizers, show officials and/or the FEI.
- I agree that video and/or photography may be used to confirm my eligibility for an EC Dressage/Para-Dressage Dispensation Certificate and/or classification grade. This may include my activity on and/or off the field of play during equestrian activity.
- I certify that my EC Sport Licence is current.
- I, the athlete, agree to hold harmless and to indemnify EC from any and all liability for any property damage of any description or personal injury to me or to any third party or injury to my horse resulting from my use of the above aids. I am aware of EC bylaws, policies, rules and regulations and agree to abide by them and to be bound by them.
- I, the athlete, have reviewed the para-dressage compensating aids information and discussed compensating aids with my coach.

RIDER NAME: _____

RIDER SIGNATURE

DATE

The athlete's coach represents and warrants by means of the below signature that the athlete requires the above listed compensating aids in competition due to the athlete's impairment:

COACH NAME (PLEASE PRINT): _____

COACH'S SIGNATURE

DATE



EC DRESSAGE/PARA-DRESSAGE DISPENSATION CERTIFICATE APPLICATION FORM (Page 4 of 6)

THIS SECTION MUST BE COMPLETED IF THE RIDER IS 18 YEARS OF AGE OR UNDER

PARENT/GUARDIAN INDEMNITY AGREEMENT

A parent or guardian's signature must accompany the Medical Information Form if the athlete is 18 years of age or under at the time of signing the Medical Information Form. This signature is in addition to and not in place of the athlete's signature on the Medical Information Form.

I am the parent/guardian of _____, who was born on _____ and is therefore a minor at the time of signing the within Medical Form.

I recognize that the athlete derives benefits from signing this Medical Information Form. I also recognize that the athlete assumes obligations thereby and I further recognize Equestrian Canada's desire and need to enforce these obligations. Accordingly, I agree to hold harmless and to indemnify Equestrian Canada from any and all liability for any property damage of any description or personal injury to the athlete or to any third party or injury to athlete's horse resulting from the athlete's use of the above aids.

PARENT/GUARDIAN NAME (PLEASE PRINT)

DATE

PARENT/GUARDIAN SIGNATURE

WITNESS



**EC DRESSAGE/PARA-DRESSAGE DISPENSATION
CERTIFICATE
APPLICATION FORM
(Page 5 of 6)**

PARA-DRESSAGE DIAGNOSIS INFORMATION FORM

This section to be completed by a Doctor of Medicine only. Please print in block letters and attach a separate sheet or report if insufficient space.

Information for the Doctor of Medicine completing this form:

Medical information is necessary for athletes who wish to compete at EC Bronze level competitions. The medical information is only used to reference whether the individual has a medical impairment, which could possibly qualify under the classification system. Each athlete must have an eligible impairment that leads to permanent and verifiable activity limitation which can be measured objectively.

This medical information should provide the results of medical tests and investigations which demonstrate that the athlete has a diagnosis of a medical condition which leads to their presenting physical impairments.
Examples of documentation required: MRI, EMG for example.

THIS SECTION TO BE COMPLETED BY A DOCTOR OF MEDICINE ONLY

The Physician must certify the athlete's physical medical diagnosis with a signature, license number and a stamp. **Please print clearly.**

ATHLETE'S NAME

PHYSICIAN'S NAME

ADDRESS

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PARA-DRESSAGE DISPENSATION CERTIFICATE APPLICATION FORM (Page 6 of 6)

Diagnosis (Please list present health conditions. Do not list symptoms.):

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Primary Impairment(s) Arising from Medical Diagnosis (Health Condition):

<input type="checkbox"/> Impaired muscle power	<input type="checkbox"/> Ataxia	<input type="checkbox"/> Leg length difference
<input type="checkbox"/> Impaired passive range of motion	<input type="checkbox"/> Athetosis	<input type="checkbox"/> Limb deficiency/loss
<input type="checkbox"/> Short stature (height: ___ cm)	<input type="checkbox"/> Hypertonia	
Medical Condition is: <input type="checkbox"/> Permanent <input type="checkbox"/> Stable <input type="checkbox"/> Progressive <input type="checkbox"/> Fluctuating		
<input type="checkbox"/> Congenital (birth)		
Date of the athlete injury: _____ (DD/ MM /YYYY)		
Date of most recent surgery _____ (DD/ MM /YYYY)		

I hereby certify that the athlete named above is a current patient and has the medical conditions specified above.

SIGNATURE OF DOCTOR **DATE**

LICENSE NUMBER:

Information within this form is only for the athlete file at Equestrian Canada and is not to be submitted with athlete entries. Please be assured that all information related to medical condition/diagnosis will remain confidential and is securely stored at the Equestrian Canada office.