

# 2024 Endurance Steward's Worksheet



Name of Competition	Competition #
Dates	City/State
Name of Manager	USEF Membership # (Must be active member)
Manager's Phone	Email
Name of Secretary	USEF Membership # (Must be active member)
Secretary's Phone	Email

## COMPETITION CATEGORY

1. Please confirm all levels offered and provide the distance that was held. (EN108)

- ☐ Limited Distance (less than 80km in a single day) \_\_\_\_\_
- ☐ Open 1 (80km-119km in a single day) \_\_\_\_\_
- ☐ Open 2 (80km-100km/day over 2 days) or (64km-89km/day over 3 days or more) \_\_\_\_\_
- ☐ Open 3 (120km-139km in a single day) \_\_\_\_\_
- ☐ Open 4 (140km-160km in a single day) \_\_\_\_\_

## COMPLIANCE WITH RULES

- |  | YES                   | NO                    |
|--|-----------------------|-----------------------|
| 1. Were there any instances of equine cruelty or abuse reported or made known to you? (GR838).....   | <input type="radio"/> | <input type="radio"/> |
| If yes, please explain: _____  |                       |                       |
| _____  |                       |                       |
| 2. Are you attaching documents for the Federation to review for a possible Disciplinary Action Complaint?.....   | <input type="radio"/> | <input type="radio"/> |
| (Bylaws 701 & 705) If yes, please explain: _____   |                       |                       |
| _____  |                       |                       |
| 3. Were any Yellow Warning Cards issued? (GR1038).....   | <input type="radio"/> | <input type="radio"/> |
| If yes, please explain: _____  |                       |                       |
| _____  |                       |                       |
| 4. Were you made aware of any allegations of sexual, physical, or emotional misconduct?.....   | <input type="radio"/> | <input type="radio"/> |
| For allegations of sexual misconduct, please confirm that you made a report to the U.S. Center for SafeSport as well as the authorities if the victim was a minor when the alleged abuse occurred. For allegations of non-sexual misconduct, please provide details in an Addendum report. |                       |                       |
| 5. Were you made aware of any MAAPP violations? If yes, please provide details in an Addendum report.....  | <input type="radio"/> | <input type="radio"/> |
| 6. Did competition management communicate directly and in writing with all participants (including staff, officials, volunteers, vendors, etc.) within the last 30 days, as required by the USEF Safe Sport: Competition Quality Control System?.....                                      | <input type="radio"/> | <input type="radio"/> |
| Please identify the date that the communication was sent and the method it was communicated. _____   |                       |                       |
| _____  |                       |                       |

- YES   NO**
7. Were any divisions that were not approved by the Federation held on licensed dates?.....○.....○  
(See GR301 for exemptions.) If so, please indicate name(s) of class(es) or division(s): \_\_\_\_\_  
\_\_\_\_\_

## DURATION OF COMPETITION

- YES   NO**
1. Did the competition comply with all time schedule requirements per GR829-830?.....○.....○  
If no, please explain. If there were any cancelled days please explain: \_\_\_\_\_  
\_\_\_\_\_
2. Did weather conditions adversely affect the competition? .....○.....○  
If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

## SAFETY AND WELFARE

1. Who was the designated safety coordinator? (GR846.1) \_\_\_\_\_  
Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_
- YES   NO**
2. Was the Accident Preparedness Plan and Isolation Protocol distributed appropriately to all competition officials and competition staff?.....○.....○
3. Were any horses at the competition identified as showing symptoms of infectious disease, put into isolation, or transported to receive treatment for potential infectious disease? .....○.....○  
If yes, please explain and include the date/time that it was reported to the USEF Drugs & Medications Program (GR845.1) \_\_\_\_\_  
\_\_\_\_\_
- PRESENT   ON CALL   NONE**
4. Was an ambulance on the competition grounds? (GR847.2) .....○.....○.....○
- YES   NO**
5. Were the required number of qualified medical personnel available in accordance with GR847.1 and GR847.3? .....○.....○  
If yes, please list the number and type present at the competition:  
EMT \_\_\_\_\_ Paramedic \_\_\_\_\_ Certified First Responder \_\_\_\_\_ Physician/Nurse trained in pre-hospital trauma care \_\_\_\_\_ or  
Additional CPR Certified Personnel \_\_\_\_\_ If no, please explain: \_\_\_\_\_  
\_\_\_\_\_
6. Did any accidents/injuries/collapses/fatalities occur during this competition? .....○.....○  
If yes, please indicate the number below and complete an accident/injury report form for each accident or injury.  
Number of human accidents or injuries \_\_\_\_\_  
Number of human fatalities \_\_\_\_\_  
Number of equine accidents, injuries, or collapses \_\_\_\_\_  
Number of equine fatalities \_\_\_\_\_
- PRESENT   ON CALL   NONE**
7. Were the required number of Federation licensed Endurance Veterinarians present in accordance with EN107.1.b-c and GR1211.5? .....○.....○.....○  
Please provide the name of the veterinarian \_\_\_\_\_  
\_\_\_\_\_  
If no, please explain: \_\_\_\_\_  
\_\_\_\_\_

8. Was a farrier present or on call in compliance with the rules? (GR1211.6 and EN107.1.d) ..... **PRESENT** **ON CALL** **NONE** ☐ ☐ ☐

## STANDARDS FOR MANAGEMENT AND FACILITIES

1. Was the footing in all exercise areas, inspection areas, and on all loops safe and appropriate for an Endurance event? (GR834.5) ..... **YES** **NO** **N/A** ☐ ☐ ☐  
If not, please provide details including which areas were affected. \_\_\_\_\_  
\_\_\_\_\_
2. Did competition management properly maintain the footing to ensure an appropriate surface? (GR1216.11)..... ☐ ☐ ☐  
If not, please provide details including which areas were affected. \_\_\_\_\_  
\_\_\_\_\_
3. Did you thoroughly inspect the competition facility, stabling and or/paddock area each day in accordance with GR1034.2.e? ..... ☐ ☐ ☐  
If no, please explain \_\_\_\_\_  
\_\_\_\_\_
4. Was the competition facility maintained and in good condition (restrooms, roads and pathways, fencing, facility equipment, trash containers, manure containment, wash areas, etc)? (GR1216)..... ☐ ☐ ☐  
If not, please provide details. \_\_\_\_\_  
\_\_\_\_\_
5. Did the competition provide suitable and maintained stabling and/or paddock areas (adequate drainage, safe electricity, adequate lighting, water sources, visible barn identification, etc)? (GR1215) ..... ☐ ☐ ☐
6. Were there any safety issues noted within stabling and/or paddock areas (protruding nails or other hazards in stalls, holes in walls, uneven ground, tent poles in stalls with horses, etc)? ..... ☐ ☐ ☐  
If yes, please provide details. \_\_\_\_\_  
\_\_\_\_\_
7. Did the competition provide 6 consecutive hours overnight of minimal lighting and noise for stabled horses per GR1215.4?..... ☐ ☐ ☐  
If no, please provide details \_\_\_\_\_  
\_\_\_\_\_
8. Did you have any concerns related to safety and welfare of horses and competitors during the competition? ..... ☐ ☐ ☐  
If yes, please provide details. \_\_\_\_\_  
\_\_\_\_\_
9. Did any competitors raise concerns regarding the facility, stabling and/or paddock area, or footing during the competition? ..... ☐ ☐ ☐  
If yes, please provide details including actions taken by management, if any. \_\_\_\_\_  
\_\_\_\_\_
10. Were a sufficient number of sharps containers available and were they disposed of properly? (GR1210.4) ..... ☐ ☐ ☐  
If no, please provide details \_\_\_\_\_  
\_\_\_\_\_
11. Did any competitor use illegal equipment or devices while competing? (EN103)..... ☐ ☐ ☐  
If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_

12. Was a retirement ceremony held for any horse? (GR812) .....○.....○  
If yes, please list the horse's name, registration number and owner. \_\_\_\_\_

13. Was the Competition Manager present and available at all times? .....○.....○  
If no, please name the individual who acted in this capacity \_\_\_\_\_

## ENDURANCE CRITERIA

1. Were there any instances of non-compliance with USEF rules, or class specifications for any Endurance levels held?....☐.....☐  
If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_
2. Were all veterinary inspections and examinations of horses conducted in accordance with EN116.1?.....☐.....☐  
If no, please explain. \_\_\_\_\_  
\_\_\_\_\_
3. Was there water available for the combinations on course every 10km? (EN110.6) .....☐.....☐  
If no, please explain. \_\_\_\_\_  
\_\_\_\_\_

## OFFICIALS

USEF LICENSE TYPES & CODES

FEI Endurance Veterinarian  
FEI Endurance Treatment Veterinarian

[illegible]

YES NO

1. Did any U.S. or foreign FEI officials officiate for national rides using only their FEI license? .....○.....○  
If yes, please provide their name, FEI ID number, and role at the competition. \_\_\_\_\_  
\_\_\_\_\_
2. Please list the names and USEF ID numbers for all apprentices that were present at the competition. \_\_\_\_\_  
\_\_\_\_\_
3. Do you have any additional comments regarding Licensed Officials at the competition? .....○.....○  
If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_

COMMENTS

YES NO

1. Were there any issues at this competition you wish to include in your report? .....○.....○  
If yes, please provide details below. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Do you have any positive comments regarding this competition? .....○.....○  
Please provide any positive feedback below. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_