

# Intercollegiate Dressage Association

## Accident Preparedness Plan

This plan must be filled out by all hosting schools and submitted to the regional representative and IDA National secretary two weeks prior to the show and submitted with the prize list to all competing teams. Failure to do so will result in loss of the show being recognized by IDA.

**Hosting College:** \_\_\_\_\_  
Site of show, GPS Address: \_\_\_\_\_

**Safety Coordinator:** Name: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

**Local Hospital:** \_\_\_\_\_  
Address: \_\_\_\_\_  
Directions from show facility: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Some areas have different levels of hospitals; list also nearest major trauma center:*

**Major Trauma Center:** \_\_\_\_\_  
Address: \_\_\_\_\_

**A copy of this plan has been sent to all competing teams and the below list:**

Show Manager: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_  
Regional Rep.: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_  
National Secretary: Kristen Kelley McLaughlin Email: [nationalsecretary.ida@gmail.com](mailto:nationalsecretary.ida@gmail.com) Cell: 804-822-6499

### **Medical Personnel:**

Will medical personnel be on site? **Yes** No

If yes: what is their level of training? \_\_\_\_\_

Medical Personnel if on site:

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Location of medical personnel during competition:

**Crisis Spokesperson(s):** \_\_\_\_\_

Local spokesperson (show manager or college designee):

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

National spokesperson:

IDA President: Lisa Moosmueller-Terry Email: [lmoosmuellerterry@ehc.edu](mailto:lmoosmuellerterry@ehc.edu) Cell: 276-698-4757

**Veterinarian on call:** Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Ambulance will be called by:** \_\_\_\_\_  
911 or other \_\_\_\_\_