



# UNOFFICIAL EA DRESSAGE JACKPOT COMPETITION ENTRY FORM

**Sunday 30<sup>th</sup> April 2017**

**\*\*Woody Yaloak Equestrian Centre\*\***

**5 Lords Road, Smythesdale**

*Payment Methods:*

Cheques and Money Orders payable to: **"APHA Inc. - Ballarat Promotional Group"**

or EFT Payments: BSB: 633-108 Account No: 140351362

(please use your name as reference and include a copy of the payment receipt with your entry)

Post to: Nadine Gass – 99 Sebastopol-Smythesdale Road, Smythesdale, VIC, 3351

or Email to: [shantouq@bigpond.com](mailto:shantouq@bigpond.com)

Please ensure you provide a **legible email address** for time/s to be returned to you.

Name of Horse:.....

Name of Rider:.....

Address:.....

Suburb:.....Postcode:.....Phone No:.....

Email:.....

Test: .....

Test: .....

Test: .....

Test: .....

Tests x \_\_\_\_\_ \$ \_\_\_\_\_

Day Insurance @ \$10.00 per rider \$ \_\_\_\_\_ (for ALL non-APHA Inc. members)

Overnight Camping (if required) @ \$15.00 \$ \_\_\_\_\_

Overnight Yard (if required) @ \$10.00 per horse \$ \_\_\_\_\_

Facility Fee (per horse) \$ 5.00 (compulsory)

TOTAL FEES = \$ \_\_\_\_\_

## **INSURANCE NOMINATION**

**\*\*HRCV / PCV / EA Insurance not accepted\*\***

**Please tick the appropriate section, sign and date**

\_\_\_\_\_ I am a FINANCIAL member of the APHA Inc. and have paid my insurance through APHA Inc.  
APHA Inc. Membership No.: \_\_\_\_\_ (copy of Membership Card to be provided).

\_\_\_\_\_ I am not a member of the APHA Inc. and agree to pay \$10.00 per rider for on the day insurance (complete waiver).

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_



## Australian Palomino Horsebreeders Association Inc.

ABN 70 637 393 265



### Non - Member Application & Release of Waiver of Liability

Participants who are **not** members of Australian Palomino Horsebreeders Assoc. Inc. (APHA Inc.) are deemed to become a temporary day member of the APHA Inc. for the purposes of participation only. Protection is afforded to the participant under the APHA Inc.'s public liability policy during such activities.

**A fee of \$10 for temporary day membership is payable accompanied with this form.**

Full name of participant and full name of guardian (if under 18 years)

.....  
Address.....

State.....Post Code.....Date of birth.....

Horse's Name.....

Event/Activity – ..Unofficial Dressage Jackpot Competition.....

Address of Event/Activity – ..Woody Yaloak Equestrian Centre, Lords Lane, Smythesdale.....

Date of Event/Activity – ..Sunday 30<sup>th</sup> April 2017.....

Name of affiliate holding Event/Activity –... APHA Inc. (Ballarat Promotional Group).....

### **Horse Sports are a Dangerous Activity**

In consideration for being permitted to participate in any way in horse sport activities and in particular this event, I, \_\_\_\_\_ (**PARTICIPANT'S NAME**), the undersigned, understand, acknowledge and accept that:

1. Horse sports are a dangerous recreational activity and horses can act in a sudden and unpredictable (changeable) way, especially if frightened or hurt.
2. There is a significant risk that serious **INJURY** or **DEATH** may result from horse sport activities and in particular this event.
3. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the Australian Palomino Horsebreeders Association Inc. (hereafter referred to as the "Releasees") or others and I **voluntarily PARTICIPATE** at my **OWN RISK** and assume sole responsibility for any injury, death or property damage I may suffer that arises from my participation in horse sport activities.
4. I understand and acknowledge the dangers associated with the consumption of alcohol or any mind altering drugs before and during the activity and I take full responsibility for any injury, loss or damage associated with their consumption. I agree not to drink alcohol or take drugs prohibited by law before or during this event.
5. I agree to follow the directions of any event organiser or official and that any misconduct or refusal by me to follow any direction of any organiser or official can result in the **CANCELLATION** of my participation in the event and my immediate removal from my horse **NO MATTER** where that may occur. I understand that any such non-compliance may result in injury, death and/or permanent disability and I agree to indemnify the Releasees against all claims made by any person as a result of my failure to comply.
6. I agree to wear a helmet at all times during the event and agree that I am solely responsible for ensuring that I wear a suitable helmet at all times and take sole responsibility for my actions.
7. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, **HEREBY RELEASE AND HOLD HARMLESS AND AGREE NOT TO SUE** the Australian Palomino Horsebreeders Association Inc., their officers, officials, volunteers, coaches, agents and/or employees, other participants, sponsoring agencies, sponsors, state bodies, affiliated clubs and if applicable, owners and lessors of premises used to conduct the activities (all of whom are referred to as "Releasees") **WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, OR loss or damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.**

### **Effect of this Document**

I have had sufficient opportunity to read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without inducement of any kind.

I understand that my signature to this document constitutes a complete and unconditional release of all liability of the Releasees, to the greatest extent allowed by law in the event of me and/or the children under my care, suffering injury or death.

Dated: \_\_\_/\_\_\_/\_\_\_ Signature of participant/guardian \_\_\_\_\_

### **For Participants of Minority Age (Under Age 18)**

This is to certify that I, as a parent/guardian with legal responsibility for this participant, acknowledge, understand and accept ALL OF THE ABOVE and consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities arising from my minor child's involvement or participation in horse sport activities and in particular, this event, **EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES**

Dated: \_\_\_/\_\_\_/\_\_\_ Signature of parent/guardian \_\_\_\_\_