THE CRABBET ARABIAN GROUP OF AUSTRALIA INC.OPEN DRESSAGE DAY - SUNDAY 28TH AUGUST AT VINES PONY CLUB OLD STOCK ROUTE ROAD OAKVILLE

Maximum 3 tests over 2 consecutive levels per horse/rider ~EA rules apply~Ribbons to 6th place ~ One horse/one rider combination~

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EVENT 1
           Pre Prep 1 Led or Assisted
EVENT 2
           Preparatory A 2013 - Young Horse - 6 yrs and under
EVENT 3
           Preparatory A 2013
EVENT 4
           Preparatory C 2013
           Preparatory D 2013
EVENT 5
EVENT 6
           Preliminary 1.1 2014 - Young Horse - 6yrs and under
           Preliminary 1.1 2014
EVENT 7
EVENT 8
           Preliminary 1.2 2014
EVENT 9
           Preliminary 1.3 2014
           Novice 2.1 2014
EVENT 10
EVENT 11
           Novice 2.2 2014
           Novice 2.3 2014
EVENT 12
           Elementary 3.1 2014
EVENT 13
EVENT 14
           Elementary 3.2 2014
           Elementary 3.3 2014
EVENT 15
           Medium 4.1 2014
EVENT 16
EVENT 17
           Medium 4.2 2014
EVENT 18
           Medium 4.3 2014
EVENT 19 Advanced 5.1 2014
EVENT 20 Advanced 5.2 2014
EVENT 21 Advanced 5.3 2014
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CLOSING DATE 12TH AUGUST 2016

PLEASE MAKE CHEQUES PAYABLE TO " CRABBET ARABIAN GROUP OF AUST. INC." DIRECT DEPOSIT AVAILABLE ~ CONTACT SECRETARY: Jackie@iprimus.com.au ENTRIES PLEASE SEND TO: 502 TIZZANA ROAD EBENEZER 2756
ANY QUERIES TEL:JACKIE DAND ON 02 4579 1037 OR JAN NICHOLS 0484 261 028 DAY INSURANCE \$10 IF NOT A MEMBER OF EA.,AHSA or AFFILIATE MEMBERSHIP NUMBER TO BE INCLUDED WITH ENTRY FORM REMEMBER EA MEMBERSHIP RUNS OUT 30TH JUNE 2016 ENTRIES: \$25.00 PER TEST

KEEP UP TO DATE WITH THE DRESSAGE THROUGH OUR FACEBOOK PAGE. CRABBET ARABIAN GROUP - DRESSAGE. ESPECIALLY BAD WEATHER UPDATES. PROGRAMS, RESULTS ETC.

Event No	Horse's Name	Rider's Name	Entry Fee	Insurance Fee (if Applicable)
^ D			tal Entry Fee \$	Total Insurance Fee S
Owner D	etails (Mr/Mrs/Miss/Ms/Dr	r		• • • • • • • • • • • • • • • • • • • •
Name for	r Draw	· ·		
. 11000000				
∃mail Ao	ddress for Draw	*		
		RINT EMAIL ADDRESS		
agree to conduct o	of dressage tests	nditions of entry and rules	and regulations a	as set down by the
Vame				
Signature	;	•		
Date			<i>a</i> :	
	ž		B/C	
*******		/ exp.date	/	
Cardhol	ders name	•••••		
Cardhol	ders Signature	Amount	\$	

The Arabian Horse Society of Australia Ltd.

LIABILITY DECLARATION FORM FOR AFFILIATES 2016



EVERY PARTICIPANT WHO WILL BE A HANDLER, RIDER, DRIVER, GROOM & ANYONE HANDLING A HORSE OR PONY **MUST COMPLETE THIS DECLARATION**

OWNERS OF ALL REGISTERED ARABIANS AND ARABIAN DERIVITATIVES MUST BE CURRENT FINANCIAL MEMBERS OF THE ARABIAN HORSE SOCIETY TO BE ELIGIBLE TO COMPETE.

THE ARABIAN HORSE SOCIETY OF AUSTRALIA LIMITED advises that we are not to allow anyone to show, handle, ride, drive or prepare any horse or pony unless one of the following criteria is met.

PLEASE TICK THE APPROPRIATE BOX:

	I am a current financial member of this Affiliate and therefore I am covered by this Group's Public Liability Insurance. My membership number is and I have attached a photocopy of my current membership card.
	I am a current financial member of The AHSA Ltd and therefore I am covered by The AHSA Ltd Group Public Liability Insurance. My membership number with The AHSA is
	I am a current financial member of another AHSA Affiliate group and therefore I am covered by this Group's
	Public Liability Insurance. I have attached a photocopy of my AHSA Affiliate Membership Card.
	I am a current member of an equine association, and/or I hold a current insurance policy, which provides me with 24/7 Public Liability insurance to the minimum limit of \$10,000,000 per occurrence.
	My membership / policy number is
	Membership Card / Insurance Policy / Certificate of Currency as proof of this insurance. I am not a member of any of the above and do not have a current Public Liability policy with a minimum of \$10,000,000 cover so will complete the Registered Participant Application and tender the appropriate fee
	per day (including GST) to cover the cost of participation with this affiliate group for each day of this event. I am also aware that this is not Personal Liability Insurance so cover does not extend to cover travel to and from this show.
claims, omissic handlir the par to have	ideration of your accepting my participation, I hereby undertake to indemnify the organizing body against all losses, suits and damages made against or suffered by the organizing body by reason of any negligent act or on on the part of any rider, driver, trainer or attendant whilst he/she is attending, riding, driving or otherwise g any horse so entered or any other horse owned or entered by me, and I agree that any act or omission on t of such rider, driver, handler or attendant found in any action against you to be negligent shall be deemed been negligent for the purpose of any claim under this indemnity.
of Aus	r, I agree to abide by the Rules & Conditions and current Rule Book as laid down by the Arabian Horse Society tralia Limited and/or contained in any official show schedule and I also agree to abide by all of the cound rules regarding use of their centre and its facilities.
Print N	ame:Dated
Signed:	
For Par	ticipants of Minority Age (Under Age 18)
This is and accommuself,	to certify that I, as a parent/guardian with legal responsibility for this participant, acknowledge, understand cept all of the above and consent and agree to his/her release as provided above of all the Releasees, and, for my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any liabilities arising from my minor child's involvement or participation in horse sport activities and in particular,
	ent, even if arising from the negligence of the Releasees.
Signatu	re of Parent/Guardian:Dated:Dated:

The Arabian Horse Society of Australia Ltd.



Date of birth

REGISTERED PARTICIPANT APPLICATION 2016

Full Name of attendee and guardian (if under 18 years)

To be completed by participants who are NOT current Financial Members of AHSA Ltd or a current Member of an AHSA Ltd Affiliate Organisation.

Participants* in events organised by AHSA Ltd. Affiliate Organisations, who are not current Financial Members of AHSA Ltd, a current AHSA Ltd Affiliate Organisation, or who do not have any other approved insurance in place, upon completion of this form are deemed to be "Registered Participants" of the event. Protection is afforded to the participant under the AHSA Ltd. Public Liability policy only whilst participating in activities organised and/or run by the AHSA Ltd. Affiliate Organisation at that event where they are liable for causing bodily injury or property damage to others, excluding whilst travelling to and from such event. By completing this form, you agree to abide by the Rules & Conditions of the AHSA Ltd. and any Rules of the event. (*Examples of Participants: handlers/riders/trainers/strappers/grooms etc)

Associa	ated Stud / Training Facility (if applicable)		
Addres	s	State	Post Code
Horses	name(s)		
	Activities		
Addres	s of Event/Activity		
Date o	f Event/Activity		
	of Organising Body		
Please	declare which Registered Participant category	applies to you:	
	Unprofessional Registered Participant is an not provide proof of cover under another popurpose of participating in this AHSA or Affilial Professional Registered Participant is an indoes not provide proof of cover under an purpose of participating in this AHSA or Affilial will provide cover for your Personal Liability afford cover to any business entity and cover	licy, and who does not received at event. – Insurance condividual who is not a Firother policy, who received liate event. – Insurance condividual participating in the	ceive any kind of remuneration* for the st \$10.00 per day. nancial Member of the AHSA and who es any kind of remuneration* for the ost \$30.00 per day. In this case insurers he registered event only. This does not

(*Remuneration includes any payment, or payment in kind, received for the purpose of participating as a Registered Participant in the AHSA or Affiliate Event)

in the AHSA or AHSA Affiliate show even in a Professional capacity.

NOTE: Whilst **Financial Members** of the AHSA are not covered whilst transacting and/or conducting their own income earning commercial or business related activities they are covered for the purpose of competing

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, the undersigned, understand, acknowledge and accept that:

Horse sports are a dangerous recreational activity and horses can act in a sudden and unpredictable (changeable) way, especially if frightened or hurt.

There is a significant risk that serious <u>INJURY</u> or <u>DEATH</u> may result from horse sport activities and in particular this event.



I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the proprietors of the Arabian Horse Society of Australia Ltd and/or the event organiser (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.

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.

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 <u>CANCELLATION</u> of my participation in the event and my immediate removal from my horse <u>NO MATTER</u> where that may occur. I further agree to abide by the Rules and Conditions of this show and the official Rule Book of the Arabian Horse Society of Australia. 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.

I agree to wear a helmet at all times whilst riding and agree that I am solely responsible for ensuring that I wear a suitable helmet at all times while riding and take sole responsibility for my actions.

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 proprietors of the Arabian Horse Society of Australia Ltd and/or the event organiser, 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.

I understand that due to diseases such as equine influenza, the Department of Primary Industries, or other state or commonwealth government bodies may restrict or prevent the movement of horses, vehicles and personnel for a time period, otherwise known as a "standstill". I acknowledge that a standstill is a risk of competing and agree to pay any costs or expenses incurred by any person or organisation for and on behalf of my horse(s) as a result of the standstill.

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:
•	Age (Under Age 18) - This is to certify that I, as a parent/guardian with legal responsibily ledge, understand and accept all of the above and consent and agree to his/her release
•	Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree ess the Releasees from any and all liabilities arising from my minor child's involvement
participation in horse s Releasees.	ort activities and in particular, this event, even if arising from the negligence of t
Dated:/	Signature of Parent/Guardian: