N.S.W. ARABIAN HORSE ASSOCIATION INC. UNOFFICIAL DRESSAGE DAY

Saturday 4th June 2016

This fun and informal dressage day is a great opportunity to get your horse out and start training for our upcoming official dressage days that are associated with our major shows (N.S.W. Arabian State Titles, National Arabian Stud Horse Show and the East Coast Arabian Championships).

Plaiting of your horse is optional. Riding jackets are optional. Every competitior must wear an approved helmet, gloves and boots (short boots only for competitors in age defined classes for 17 years and under).

Held at Londonderry Pony Club – 905 Londonderry Road, Londonderry N.S.W.

Any queries please contact Kylie Jones – 0412661834 Entries to be posted to: 93 Arcadian Road, Kurrajong, N.S.W., 2758 Entries - \$25.00 per test

Day insurance if not AHSA or EA member: \$10.00 Enter *four* tests get the *fifth* one <u>free</u> ENTRIES CLOSE FRIDAY 20TH MAY 2016

Enter as many tests as you would like – Enter *four* tests get the *fifth* one <u>free</u>
Ribbons/Rosettes to 6th place – 1st place wins a prize
\$5 gate fee payable upon pickup of numbers
Ponies 14.2hh and under; Horses over 14.2hh

Current height certificate to be supplied.

Event 1 – Pre Prep (led) – *Under 12; 12-17; 18*+

Event 2 – Preparatory A 2013 – *Under 12; 12-17; 18-29; 30*+

Event 3 – Preparatory B 2013 – *Under 12; 12-17; 18-29; 30*+

Event 4 – Preparatory A 2013 – *Pony/Horse*

Event 5 – Preparatory B 2013 – *Pony/Horse*

Event 6 – Preparatory A 2013 – *Young Horse* (under 6yrs)

Event 7 – Preliminary 1.1 2014 – *Under 12; 12-17; 18-29; 30*+

Event 8 – Preliminary 1.2 2014 – *Under 12; 12-17; 18-29; 30*+

Event 9 – Novice 2.1 2014 – *Under 12; 12-17; 18-29; 30*+

Event 10 – Novice 2.2 2014 – *Under 12; 12-17; 18-29; 30*+

Event 11 – Preliminary 1.1 2014 – *Pony/Horse*

Event 12 – Novice 2.1 2014 – *Pony/Horse*

Event 13 – Preliminary 1.1 2014 – *Young Horse* (under 6yrs)

CLOSING DATE FRIDAY MAY 20TH 2016

Please make cheques payable to: N.S.W. Arabian Horse Association

Direct Deposit available – contact secretary: secretary@nswarabian.org.au

Please send entries to: 93 Arcadian Road, Kurrajong, N.S.W., 2758

Any queries please contact Kylie Jones: 0412661834

Day insurance \$10 if not a member of EA or AHSA. Membership number to be include with entry form.

Entries: \$25.00 per test

Enter four tests get the fifth one free

For multiple horses, please print off and fill out this page again. Owner Details: (Mr/Mrs/Miss/Ms/Dr.) Name for Draw: Horse's Name: Email Address for Draw: Please tick applicable; ☐ Event 9 ☐ Event 1 ☐ Event 5 □ Under 12 □ Ponv □ Under 12 □ 12-17 ☐ Horse □ 12-17 $\Box 18 +$ □ 18-29 ☐ Event 6 $\Box 30 +$ \square Event 2 □ Event 7 ☐ Under 12 ☐ Event 10 ☐ Under 12 \Box 12-17 ☐ Under 12 □ 12-17 □ 18-29 □ 12-17 □ 18-29 □ 30+ □ 18-29 □ 30+ $\Box 30 +$ ☐ Event 3 □ Event 8 ☐ Event 11 ☐ Under 12 ☐ Under 12 □ Ponv □ 12-17 □ 12-17 ☐ Horse □ 18-29 □ 18-29 $\Box 30 +$ □ 30+ ☐ Event 12 ☐ Event 4 \square Pony □ Pony ☐ Horse ☐ Horse ☐ Event 13 I agree to abide by the terms and conditions of entry and rules and regulations as set down by the conduct of dressage tests. Name: Signature: Date: CREDIT CARD PAYMENT OPTION I wish to pay by - Bankcard \square Visa □ Mastercard Amount: \$..... Expiry Date: Card Number: Cardholder's Name: Cardholder's Signature:

Please note all credit card payments will now incur a 1.5% surcharge on top of your total entries

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 and I have attached a photocopy of my current AHSA Membership Card.
	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 and I have attached a photocopy of my 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.

In consideration of your accepting my participation, I hereby undertake to indemnify the organizing body against all claims, losses, suits and damages made against or suffered by the organizing body by reason of any negligent act or omission on the part of any rider, driver, trainer or attendant whilst he/she is attending, riding, driving or otherwise handling any horse so entered or any other horse owned or entered by me, and I agree that any act or omission on the part of such rider, driver, handler or attendant found in any action against you to be negligent shall be deemed to have been negligent for the purpose of any claim under this indemnity.

Further, I agree to abide by the Rules & Conditions and current Rule Book as laid down by the Arabian Horse Society of Australia Limited and/or contained in any official show schedule and I also agree to abide by all of the Showground rules regarding use of their centre and its facilities.

Print Name:		
Dated	* *	
Signed:	*	
Contact Phone Number:	jow-	
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/h		
release as provided above of all the Releasees, and, for myself, my heirs, assigns, a	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.		
Signature of Parent/Guardian: Dated:		

The Arabian Horse Society of Australia Ltd.



REGISTERED PARTICIPANT APPLICATION 2016

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)

Full Name of attendee and guardian (if	f under 18 years):		
Date of birth:			
Associated Stud / Training Facility (if a	pplicable):		
Address	State	Post Code	
Horses name(s)			
Event/Activities			
Address of Event/Activity			
Date of Event/Activity			
Name of Organising Body			
Please declare which Registered Partic	cipant category applies to	you:	
AHSA, who does not provide pr	oof of cover under anotl	who is <u>not</u> a Financial Member of th her policy, and who does not receiv ing in this AHSA or Affiliate event	e
Professional Registered Partic AHSA and who does not provide proof remuneration* for the purpose of part	of cover under another		

\$30.00 per day. In this case insurers will provide cover for your Personal Liability whilst participating in the registered event only. This does <u>not</u> afford cover to any business entity and cover is limited to the inidividual participant only.

NOTE: Whilst **Financial Members** of the AHSA are not covered whilst transacting and/or conducting their own income earning commercial or business related activities <u>they are covered for the purpose of competing</u> in the AHSA or AHSA Affiliate show even in a Professional capacity.



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

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:
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: