

OPEN DRESSAGE DAY SUNDAY 26TH AUGUST 2018 AT VINES PONY CLUB, OLD STOCK ROUTE ROAD, OAKVILLE..

ENTRIES PLEASE POST TO: JAN NICHOLS, 48 BOOMERANG DRIVE GLOSSODIA 2756 or EMAIL THEM TO rajiyyah@hotmail.com 45766332

ENTRIES \$25 PER TEST OR 3 TESTS FOR \$60 ENTRIES CLOSE FRIDAY 10TH AUGUST 2018

DIRECT DEPOSIT AVAILABLE ON REQUEST.

PLEASE MAKE CHEQUES PAYABLE TO CRABBET ARABIAN GROUP OF AUST. INC.

DAY INSURANCE IS \$10 PER DAY IF NOT A MEMBER OF EA. AHSA OR AN AFFILIATE. COPY OF MEMBERSHIP TO BE SENT WITH ENTRIES.

IF YOU BECOME A MEMBER OF THE CRABBET ARABIAN GROUP OF AUST. INC. THE COST IS \$10 MEMBERSHIP UNTIL JUNE 2019

THIS DRESSAGE DAY WILL BE CONDUCTED UNDER EA RULES WITH EA JUDGES AND EA TESTS.

MAXIMUM OF 3 TESTS PER DAY, PER HORSE, OVER 2 CONSECUTIVE LEVELS. ONE HORSE/ONE RIDER COMBINATION AS PER EA RULES

EVENT 1. EVENT 2.	PRE PREP 1 PRE PREP 2			To be held in small fenced in arena These 2 tests are for beginner children only
EVENT 3. EVENT 4. EVENT 5.	PREPARATOR PREPARATOR PREPARATOR	Y A 2013	YOUNG HORSE	6 AND UNDER
EVENT 6. EVENT 7. EVENT 8. EVENT 9.	PRELIMINARY PRELIMINARY PRELIMINARY PRELIMINARY	7 1.1 2014 7 1.2 2014	YOUNG HORSE	6 AND UNDER
EVENT 10. EVENT 11. EVENT 12.	NOVICE 2.2 20)14		
EVENT 13. EVENT 14. EVENT 15.	ELEMENTARY	3.2 2014		
EVENT 16. EVENT 17. EVENT 18.	MEDIUM 4.1 20 MEDIUM 4.2 2 MEDIUM 4.3 2	014		
EVENT 19. EVENT 20.				

KEEP UP TO DATE WITH DRESSAGE THROUGH OUR CRABBET ARABIAN GROUP – DRESSAGE PAGE ON FACEBOOK. PROGRAMS, DRAW, RESULTS AND ESPECIALLY BAD WEATHER UPDATES ETC.

POST ENTRIES TO: JAN NICHOLS, 48 BOOMERANG DRIVE, GLOSSODIA 2756 OR EMAIL: rajiyyah@hotmail.com

EVENT 21. ADVANCED 5.3 2017

Eve No	ent Horse's Name	Rider's Name	Entry Fee	Insurance Fee (if Applicable)
		The same of the sa		
			Total Entry Fee \$	Total Insurance Fee
Owner	Details (Mr/Mrs/Miss/Ms/Dr			2
I agr cond Nam	ree to abide by the terms and condituted of dressage tests	NT EMAIL ADDRESS Clains of entry and rules an	LEARLY	
•••••	•••••	signature		
Date				
	.4% Surcharge on Credit Cards/	/ exp.date	/	
	Cardholders Signature			



The Crabbet Arabian Group of Australia Inc.

C/- 502 Tizzana Road, Ebenezer NSW 2756

MEMBERSHIP APPLICATION/RENEWAL

NAME MR/MRS	S/MS		
ADDRESS			
			•••
Phone	Mobile		
Email			
Website	÷	8	
I agree to abide	by the rules and regulations of the Crabbet Arabian	Group of Australia	Inc.
Signature	Date	<i></i>	
Please Circle on	ne:		
I/We wish to app	ply for membership of the Crabbet Arabian Group of	f Australia Inc	
I/We wish to ren	new our membership of the Crabbet Arabian Group	of Australia Inc.	
Members Fees	\$10.00 per year to 30th June 2 0 19		
If a member of the	he Arabian Horse Society of Australia		
Membership Na	me		
Membershin Nu	mher		

Liability Declaration For Day Members At "Open Events" Only

The Arabian Horse Society of Australia Ltd

EVERY DAY MEMBER 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 DERIVATIVES MUST BE CURRENT FINANCIAL MEMBERS OF THE ARABIAN HORSE SOCIETY TO BE ELIGIBLE TO COMPETE.

"Open Event" shall mean a Non-Arabian event including Dressage, Hacking, Rider and Harness classes only, or otherwise agreed by the Arabian Horse Society of Australia Ltd.

Plea	se tick one of the below boxes which applies to you	ı:
	with 24/7 Public Liability insurance to the minimu	, and / or I hold a current insurance policy, which provides me im limit of \$10,000,000 per occurrence. My membership / Policy attached a photocopy of my Membership Card / Insurance Policy
	cover so will complete the Application for Day Men	ove a current Public Liability policy with a minimum of \$10,000,000 nbers and tender the appropriate fee of \$10.00 per day (including filiate group for each day of this event. I am also aware that this not extend to cover travel to and from this show.
clair omis hand part beer Furt	ns, losses, suits and damages made against or sussion on the part of any rider, driver, trainer or attalling any horse so entered or any other horse owned of such rider, driver, handler or attendant found in a negligent for the purpose of any claim under this ther, I agree to abide by the Rules and Conditions as	nd current Rule Book as laid down by the Arabian Horse Society
	istralia Ltd and / or contained in any official show s rding use of their centre and its facilities.	schedule and I also agree to abide by all of the showground rules
Prin	t Name:	Date:
Sign	ed:	Contact Phone Number:
For P	articipants of Minority Age (Under Age 18)	
acce my h liabi	pt all of the above and consent and agree to his / he neirs, assigns, and next of kin, I release and agree	responsibility for this participant, acknowledge, understand and er release as provided above of all the Releasees, and, for myself, to indemnify and hold harmless the Releasees from any and all participation in horse sport activities and in particular, this event,

Gow-Gates Insurance Brokers Pty Ltd
Level 8, 491 Kent Street, Sydney, NSW, 2000
P:(02) 8267 9999 F: (02) 8267 9998 E: equestrian@gowgates.com.au
ABN 12 000 837 785 | AFSL 245432
EQU074_Arabians Liability Dec_FOR_020317

Signature of Parent / Guardian:





The Arabian Horse Society of Australia Ltd.

ABN 12 001 281 590



Street Address: Unit 12, 40 Bowman Street RICHMOND NSW 2753
Postal Address: Post Office Box 415 RICHMOND NSW 2753
Telephone: 02 - 45775366 Fax: 02 - 45877509

Email: secretary@ahsa.asn.au Website: www.ahsa.asn.au

Release and Waiver of Liability

In consideration for being permitted to participate in any way in horse sport activities, I, understand, acknowledge and accept that:

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

There is a significant risk that serious INJURY or DEATH may result from horse sport activities.

I understand and acknowledge the dangers associated with the consumption of alcohol or any mind altering drugs and agree not to drink alcohol or take drugs prohibited by law before or during any horse sports activities.

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 activities and my immediate removal from my horse NO MATTER where that may occur.

I agree to wear an approved helmet at all times whilst participating in the sport where this is required under the relevant AHSA rules and regulations.

I have had sufficient opportunity to read this Dangerous Activity Acknowledgement and fully understand its terms and submit it freely and voluntarily.

I have read and agree to the "Waiver of Liability" above.

FOR PARTICIPANTS OF MINORITY AGE (Under 18 Years)

This is to certify that I, as a parent/guardian with legal responsibility for this participant acknowledge, understand and accept the Waiver of Liability above and consent and agree to my minor child's involvement or participation in Horse sport activities.

I Accept the Terms & Conditions		
Members Name(s)		Membership Number
Signatory(ies) for Membership	Date	
Signatory(ies) for Membership	Date	