

NON MEMBER APPLICATION OF WAIVER OF LIABILITY

Participants in Club organized events/activities who are not registered member of the Club, upon completions of this form are deemed to be members of the club during such activities for the purposes participation only.

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

Address.....

State: Post Code..... Date of Birth.....

Horses Name:

Event :

The VERSATILE ARABIAN SHOW

Address of Event:

WHITTLESEA SHOWGROUNDS, WHITTLESEA

Date of Event::

Sunday 18TH January 2009

Name of Club:

CENTRAL ARABIAN RIDERS AND BREEDERS INC

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 **INJURY or DEATH** 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 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 **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.

I agree to wear a helmet at all times whilst riding during the event and agree that I am solely responsible for ensuring that I wear a suitable helmet at all times whilst 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 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.

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 rider/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 _____

CONDITIONS OF ENTRY – LIABILITY INSURANCE

THE ARABIAN HORSE SOCIETY OF AUSTRALIA LIMITED recommends that we do not allow anyone to Show unless one of the following criteria is met:

THIS FORM MUST BE COMPLETED BY EVERY HANDLER / RIDER / DRIVER

PLEASE TICK THE APPROPRIATE BOX:

- I have Personal Liability Insurance through the AHSA or an Affiliated club: AHSA Ltd Membership Number
- Or Affiliated Club name.....Memb No.....
- I have my own Personal Liability Insurance which covers attendance and showing at horse related shows.
- I do not have any Personal Liability Insurance I have completed the Non Members Application & Release of Waiver of Liability and tender \$10.00 to cover this cost for the duration of this Show. I am also aware that this cover does Not extend to cover to and from this show.

Is the Owner, Rider, Strapper and/or Handler adequately insured ?

YES NO

If you are being remunerated to show/handle or ride by another party the foregoing does not apply. These persons must then have their own insurance to cover such events.

NAME:.....

ADDRESS:.....

POSTCODE: TELEPHONE:

SIGNATURE: DATE:

"In consideration of your accepting one or more of the attached entries, I hereby undertake to indemnify your Committee against all claims, losses, suits and damages made against Or suffered by your Committee 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 for exhibitors as laid down by Central Arabian Riders and Breeders Inc. and/or contained in the official show schedule and I also agree to abide by all of the Werribee Park National Equestrian Centre rules regarding use of said centre and its facilities."

Please complete and sign above irrespective of your insurance option