

Release and Waiver of Liability

For Users and Key Members of the grounds at Bacchus Marsh Pony Club.

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

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Address

.....State..... Post Code.....

Preferred Phone Contact:Date of birth...../...../.....

Affiliation: PCAV EV HRCav (circle one) Membership Number.....

Additional Family Members Names (Only applicable for key members whose IMMEDIATE family members are also wishing to access grounds):

Name..... Date of birth...../...../.....

Affiliation: PCAV EV HRCav (circle one) Membership Number.....

Name..... Date of birth...../...../.....

Affiliation: PCAV EV HRCav (circle one) Membership Number.....

Name..... Date of birth...../...../.....

Affiliation: PCAV EV HRCav (circle one) Membership Number.....

Name..... Date of birth...../...../.....

Affiliation: PCAV EV HRCav (circle one) Membership Number.....

Address of Event / Activity:Bacchus Marsh Pony Club. Bacchus Marsh Race Course Reserve

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

- Horse sports are dangerous recreational activity and horses can act sudden and unpredictable way, especially if frightened or hurt.
- There is a significant risk that serious INJURY or DEATH may result from horse sport activities.
- I knowingly and freely assume all such risks, both known and unknown, 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 activities and I take full responsibility for any injury, loss of damage associated with their consumption. I agree not to drink alcohol or take any drugs prohibited by law before or during any horse sports activities.

I agree to follow the terms of my Key Membership agreement, and the rules and intentions of the club/association of which I am a member, and that any misconduct or refusal by me to follow any of these conditions can result in the CANCELLATION of my agreement with Bacchus Marsh Pony

Club and my immediate removal from any horse NO MATTER where that may occur. I understand that any such non-compliance may result in injury, death and/or permanent disability 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 helmet at all times whilst riding and take sole responsibility for my actions.

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, to the greatest extent allowed by law in the event of me and/or the children under my care, suffering injury or death.

Date:/...../..... Signature of rider:

Date:/...../..... Signature of rider:

Date:/...../..... Signature of rider:

Date:/...../..... Signature of rider:

Date:/...../..... Signature of rider:

FOR PARTICIPANTS OF MINORITY AGE (UNDER 18 YEARS)

This is to certify that I, as a parent/guardian with legal responsibility for this participant/s lacknowledge, understand and accept ALL OF THE ABOVE and consent and agree to my minor Childs/Childrens involvement or participation in horse sports activities.

Date:/...../..... Signature of Parent/Guardian: