



# Southern Vales Dressage Club

**2 DAY DRESSAGE CLINIC WITH  
Fiona Heysen (Level 2)  
Saturday 30<sup>th</sup> & Sunday 31<sup>st</sup> October 2010  
To be held at Gerry Wellington's Arena  
(Blythman Road McLaren Flat)  
Entries will close Friday 22<sup>nd</sup> October 2010**

**45 minute private lesson  
Members \$75.00 Non members \$85.00**

Please read and fill in the form below. **Fees must be included with this form.**  
Cheques or money orders to be made payable to Southern Vales Dressage Club Inc.

**Post to:** Valerie Dominy, 11 Warrigal Rd Aldinga Bch 5173  
Enquiries: Valerie Dominy 0410643958

	Name	Level of Riding	<b>Private Lesson</b> Member \$75/Non-Member \$85.00
Saturday 30/10/10			\$
			\$
Sunday 31/10/10			\$
			\$
<b>TOTAL PAYABLE:</b>			<b>\$</b>

Name \_\_\_\_\_

Address \_\_\_\_\_

Tel \_\_\_\_\_ Email \_\_\_\_\_

**PLEASE NOTE NO REFUNDS AVAILABLE UNLESS YOUR LESSON IS FILLED BY ANOTHER RIDER.**

Neither Southern Vales Dressage Club, Fiona Heysen or Gerry Wellington accept responsibility for damage or any injury to any persons, horses, or property during the running of this clinic.  
I accept that equestrian activities are inherently dangerous and absolve all organizing committees, instructors and persons of any responsibility should an accident occur.

Signed \_\_\_\_\_ ]

Parent or guardian to sign if rider is under 18 years of age.)

**NON-MEMBERS OF SOUTHERN VALES DRESSAGE CLUB MUST SIGN THE ATTACHED "NON-MEMBER RELEASE OF WAIVER OF LIABILITY AND RETURN WITH YOUR ENTRY FORM"**



# Non-Member Application / Entry Form Release of Waiver of Liability

Participants in Club-organised horse activity days, who are not registered members of the Club, are upon completion of this form deemed to be members of the club during such activities for the purposes of participation only. Protection is afforded to the participant under the club's public liability policy during such activities where they are liable for bodily injury or property damage to others. Please note this membership does not provide EFA Personal Accident Insurance.

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

Address.....

State.....Post Code.....Date of birth.....

Horse's Name.....

Event / Activity.....Fiona Heysen Clinic.....

Address of Event / Activity...Gerry Wellington's Arena, Blythmans Road McLaren Flat.....

Date(s) of Temporary Membership.....

Name of club holding Event / Activity...SOUTHERN VALES DRESSAGE CLUB.....

## 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 in particular this event.

I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of The Equestrian Federation of Australia and/or the event organiser (hereinafter 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 danger 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 participating in the sport where this is required under the relevant EFA and FEI rules and regulations and agree that I am solely responsible for ensuring that whilst participating I wear a suitable helmet at all times where required under the relevant EFA and FEI rules and regulations 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 Equestrian Federation of Australia and/or 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 \_\_\_\_\_

## 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 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 guardian \_\_\_\_\_