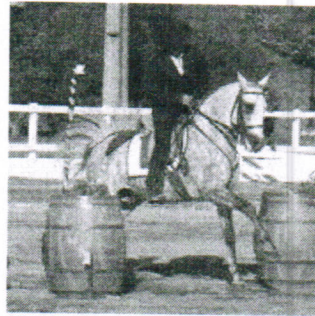
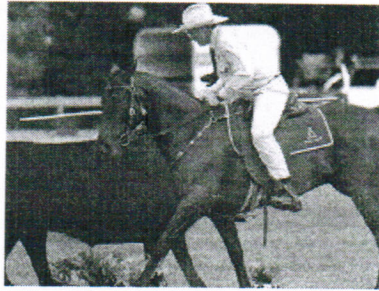


PINJARRA EQUESTRIAN ASSOCIATION

presents At Murray Regional Equestrian Centre 10th November 2018

Working Equitation with Sue Buckley

A fun way to train seriously



You may have heard about this great sport sweeping Australia. If so, **Pinjarra Equestrian Association** is hosting a Working Equitation Clinic, enabling riders to learn about this fun and exciting sport.

Working Equitation is a recognised discipline in many areas of Europe, Great Britain, Mexico, and Brazil. The sport is suitable to all breeds and levels of riders.

The competition is divided in 3 sections –with 4 phases in total–designed to test the horse and rider, through a range of activities combining dressage movements and obstacle tests–ease of handling and at speed and also cattle penning.

Australian riders from diverse equestrian disciplines are embracing the sport to add another dimension to their training. This clinic will be suited to riders of all ages, so long as they are capable of riding a horse independently and can walk and trot. A great sport for all disciplines from dressage through to cattle work or polo.

Harmony between horse & rider is the end result of good training!

Come & join us for some serious fun at Murray Regional Equestrian Centre

\$125 per rider for 2 lessons day (ground fees/insurance extra)

Deposits now being taken. Limited to 12 riders only! Get your registration in quick! Fence sitters welcome free. (Sorry no refunds if your circumstances change)

This clinic will cover : Classical Dressage - Style course (obstacles)

Cattle phase will not be covered in this clinic.

For more details contact Emma Allin emmarogger@bigpond.com 0402561206



Sue Buckley-Holistic Equine - An accredited WE Trainer/Judge

9728-0454

desertdog@westnet.com.au

www.holistichequine.com.au

Sue will provide obstacle course and training in how to ride course and what sport entails

Pinjarra Equestrian Association

Presents an Introduction to Working Equitation with
Accredited Coach Sue Buckley 10th November 2018 at Murray
Regional Equestrian Centre, Coolup 6214

Name.....Age.....

Address.....

EmailPhone.....

Horse.....Age.....

EA member Y/N member number,,,,,,,,,,,,,,,,,,,,,

Course fee	\$125.00	
Event Insurance (if not member of PEA or EA)	\$10.00	
Ground fee	\$10.00	
Fence Sitters	\$20.00	
Total		

Please deposit 50% of this total to Pinjarra Equestrian Association
bsb 633-000 ac130211444 by 2/11/18 to confirm your place in the
clinic. Balance must be paid prior to 10/11/18 Minimum number to
proceed with clinic is 8 participants, max place is 12 participants.

Email this form to emmaroger@bigpond.com together with proof of
payment and signed risk disclaimer as attached..



**EQUESTRIAN AUSTRALIA LIMITED
RELEASE AND WAIVER OF LIABILITY
ASSUMPTION OF RISK AND INDEMNITY AGREEMENT**

CLUB/COACH NAME:
CLUB/COACH ADDRESS:
EVENT:
(hereafter referred to as "EVENT(S)")

NOTE: the Competition & Consumer Act 2010 ("the Act") implies a warranty of due care and skill into contracts for the supply of services to consumers, as defined in the Act. To the extent that the warranty applies to any contract relevant to the Release and Waiver of Liability, it cannot be excluded.

Subject to that warranty, if applicable and IN CONSIDERATION of being permitted to compete, officiate, observe, work for, or participate in any way in the EVENT(S), EACH OF THE UNDERSIGNED, for himself/herself, his/her personal representatives, heirs and next of kin:

1. Acknowledges, agrees and represents that he/she further agrees and warrants that, if at any time, he/she feels anything to be unsafe, he/she will immediately advise the officials of such and refuse to participate further in the EVENT(S).
2. HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the club/coach, participants, EA and its state bodies or any subdivision thereof, officials, volunteers, medical personnel, any persons, promoters, sponsors, advertisers, owners and lessees of premises used to conduct the EVENT(S), premises and event inspectors, underwriters, consultants and others who give recommendations, directions, or instructions or engage in risk evaluation or loss control activities regarding the premises or EVENT(S) and each of them, their directors, officers, agents and employees, all for the purposes as herein referred to as "Releasees", FROM ALL LIABILITY, TO THE UNDERSIGNED, his/her personal representatives, assigns, heirs, and next of kin FOR ANY AND ALL LOSS OR DAMAGE, AND ANY CLAIM OR DEMANDS THEREFORE ON ACCOUNT OF INJURY TO THE PERSON OR PROPERTY OR RESULTING IN DEATH OF THE UNDERSIGNED ARISING OUT OR RELATED TO THE EVENT(S), WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
3. HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the Releasees and each of them FROM ANY LOSS, LIABILITY, DAMAGE, OR COST they may incur arising out of or related to the EVENT(S), WHETHER CAUSED BY THE OF THE RELEASEES OR OTHERWISE.
4. HEREBY ASSUMES FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE arising out of or related to the EVENT(S) WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
5. HEREBY acknowledges that THE ACTIVITIES THE EVENT(S) ARE VERY DANGEROUS and involve the risk of serious injury and/or death and/or property damage. Each of the UNDERSIGNED also expressly acknowledges that INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE/MEDICAL OPERATIONS OR PROCEDURES OF THE RELEASEES OR OTHERWISE.
6. HEREBY agrees that this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement extends to all acts of negligence by the Releasees, INCLUDING NEGLIGENCE RESCUE

OPERATIONS and is intended to be as broad and inclusive as is permitted by the laws of the State/Territory in which the EVENT(S) is/are conducted and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

BY SIGNING HEREUNDER I CONFIRM HAVING READ AND UNDERSTOOD THE CONTENTS OF THIS DISCLAIMER.

NAME (BLOCK LETTERS)

SIGN HERE

DATE

PARENT/GUARDIAN CONSENT FOR UNDER 18 YEAR OLD PARTICIPANTS.

I, _____ being the parent/guardian of the abovenamed _____, confirm that I have read the whole of this document and have taken all necessary actions to ensure I am aware of the activity which the above named, will be asked to participate in and consent to him/her participating. In doing so, I acknowledge that equestrian activities are dangerous and that accidents causing death, bodily injury, disability and property damage can and do happen. I agree that neither the Branch, club/coach, participants, EA and its state bodies, or any subdivision thereof, officials, volunteers, medical personnel, any persons promoters, sponsors, advertisers, owners and lessees of premises used to conduct the EVENT(S) shall be under any liability whatsoever for the death or any bodily injury, loss or damage which may be suffered or incurred by the abovenamed or by me in or being present at any activity conducted by, or on behalf of the BRANCH except for any rights the abovenamed or I may have arising under the Competition & Consumer Act (Cth) (or similar legislation)

By signing hereunder I confirm having read and understood the contents of this disclaimer.

NAME (BLOCK LETTERS)

SIGN HERE

DATE