



BALDIVIS EQUESTRIAN & PONY CLUB DRESSAGE SERIES ENTRY FORM

Sunday 11th August 2019

All tests are qualifiers for the PCWA Dressage Series Leader board and age groups will be run as follows
10 & Under, 11 – 13yrs, 14 – 16 yrs, 17 & Over, Elementary; 11 – 15yrs, 16 – 25yrs, Medium; 9 – 25yrs
Open Classes by test.

CLOSING DATE: Monday 8th August AT 9PM!

Please fill out one form per horse, place a tick beside tests being ridden:

Dressage Test	Number of tests being ridden	Non-Member of BEPC	Member of BEPC	Total
Prep C (2013)		\$30 per test	\$20 per test	
Preliminary 1C (2019)		\$30 per test	\$20 per test	
Novice 2C (2019)		\$30 per test	\$20 per test	
Elementary 3C (2019)		\$30 per test	\$20 per test	
Medium 4C (2019)		\$30 per test	\$20 per test	
PCWA Preliminary Freestyle (2019)		\$30 per test	\$20 per test	
PCWA Novice Freestyle (2019)		\$30 per test	\$20 per test	
PCWA Elementary Freestyle (2019)		\$30 per test	\$20 per test	
	Ground Fee	\$5.00		
	<i>*Members of BEPC do not pay the Ground Fee</i>			
	Yard Fee	\$10.00 per yard		
			Amount Payable	
			<i>*Please pay by EFT, Cheque or Cash</i>	

Electronic Funds Transfers: Account Name: BEPC

BSB: 036-060

Account Number: 128991

EFT Receipt No: _____

*Please use your Surname in the reference box and Dress3 ie *Jones Dress3*

***Please ensure that the Disclaimer Form is returned with your entry form or you will not be permitted to ride on the day!**

Name of Rider: _____

Age as at 1st January & Date of Birth (if under 18): _____

Rider EWA (with PCWA insurance)#: _____ PCWA #: _____

Address: _____

Telephone #: Home: _____ Mobile: _____

***You must be able to provide proof of membership/insurance on the day**

Name of Horse: _____

Pony Club: _____

Email **REQUIRED AS DRAW WILL BE EMAILED:** _____

Name of Helper: _____ Contact #: _____

It is a condition of entry that you provide a Helper for this event. Please number your preferred helper duties from 1 -3. Every effort will be made to accommodate your request but we cannot guarantee that you will receive your preferred helper duty.

Marshall _____ Gear Checker _____ Dressage Penciller _____ Runner _____
Set-Up _____ Pack Away _____
(Saturday afternoon) (Sunday afternoon)

PONY CLUB OF WESTERN AUSTRALIA INC (PCWA)



PCWA DISCLAIMER STATEMENT

CLUB NAME: Baldivis Equestrian and Pony Club

CLUB ADDRESS: Lugg Road, Baldivis WA

I acknowledge and agree as a condition of participating in any PC or PCWA event that neither the Club/Coach, participants, PCWA or any subdivision thereof, officials, volunteers, medical personnel, any persons, promoters, sponsors, advertisers, owners and lessees of premises used to conduct the EVENTS, shall be under any liability for my death or any bodily injury, loss or damage which may be sustained or incurred by me, as a result of participation in or being present at the event, except in regard to any rights I may have arising under the Trade Practices Act 1974 (Cth) (or similar State legislation).

I acknowledge that equestrian activities are dangerous and that accidents causing death, bodily injury, disability and property damage, can, and do happen.

BY SIGNING HEREUNDER I CONFIRM HAVING READ AND UNDERSTOOD THE CONTENTS OF THIS DISCLAIMER. I ACKNOWLEDGE THAT THIS DISCLAIMER IS VALID FOR ALL AUTHORISED CLUB, ZONE AND STATE PCWA EVENTS THAT I ATTEND WITHIN THE TWELVE MONTH PERIOD INCLUSIVE OF AND FOLLOWING THE DATE I HAVE SIGNED THIS FORM.

Print Name Here

Sign Here

Dated

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 abovenamed, 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 club/coach, participants, PCWA 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 above named or by me in or being present at any PC or PCWA EVENTS except for any rights the above named or I may have arising under the Trade Practices Act 1974 (Cth) (or similar State legislation).

BY SIGNING HEREUNDER I CONFIRM HAVING READ AND UNDERSTOOD THE CONTENTS OF THIS DISCLAIMER. I ACKNOWLEDGE THAT THIS DISCLAIMER IS VALID FOR ALL AUTHORISED CLUB, ZONE AND STATE PCWA EVENTS THAT I AND MY DEPENDANT ABOVE NAMED ATTEND WITHIN THE TWELVE MONTH PERIOD INCLUSIVE OF AND FOLLOWING THE DATE I HAVE SIGNED THIS FORM.

NAME (BLOCK LETTERS)

SIGNED

DATED THIS _____ DAY OF _____ 2019