## BAKERS HILL ADULT RIDING CLUB UNOFFICIAL DRESSAGE COMPETITION

(One entry form per horse)	Date: /	/	
Name	Horse Name		Stallion
Contact Number	Bakers Hill Adult Riding Club Member?	🗆 yes	🗆 no
Email	EWA Member number (if applicable)		

All riders (excluding BHARC members) must attach a signed waiver with their entry.

Yards are available for use on a first in first served basis. Please ensure if you use a yard you leave it clean, otherwise yards will not be available for free in the future. Please clean up your horses hay and manure from the yards and carpark, and place in our manure pile.

Draw will be available on Cavalletti on Thursday 16th September 2021

Stallions experienced at coping in group environments are welcome, however you must adhere to the EA stallion guidelines. \*\*Cancellation policy: If entry is withdrawn prior to closing date entry fees will be refunded less 10% administration fee. After the closing date entry fees will only be refunded (less 10%) if a vet/doctors certificate is provided\*\* Riders under 18years of age must be a member of EWA/PCAWA

## Tests to start 8:00/9:00am depending on entry numbers

Please indicate class level below. If completing the same level for more than one test, second test will be considered HC.

	Dressage	Tick	# of
	Prep E		
	Prelim 1B		
	Novice 2B		
	Elementary 3B		
	Medium 4B		
Freestyles		Tick	Level
Freestyle - please indicate which level			
Pas De Duex			

Payment

Number of Classes		Cost		Total
First test		\$30.00		
Second test		\$20.00		
3 x tests (can include a freestyle)		\$65.00		
Compulsory Day Insurance (for non BHARC members/non EWA members)		\$10.00		
Compulsory Ground Fee - 1 per entry (for non BHARC members)		\$5.00		
Raffle Tickets	1 for \$5.00 or 3 for \$10.00			
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## Entries Close: Sunday 12th September

Preferred method of entry is email & EFT payments

Email entries to:	EFT payments:	Post entries to:
<u>bakershillarc@hotmail.com</u>	Account Name: Bakers Hill Adult Riding Club BSB: 06 6524 Account No: 1009 2618 Reference: Pairs & Team Name	PO Box 1047 Northam WA 6401

Enquiries: email - bakershillarc@hotmail.com or sah.19953@gmail.com, Shelley 0400 610 244

## **Bakers Hill Adult Riding Club Inc** Competition Day Membership Enrolment form 2021

ADDRESS:	NAME :
EMAIL:	ADDRESS:
Please write one character per box (including fullstops) very clearly so we get your correct address. <ul> <li>Rally Day Membership fee - \$75.00</li> <li>Competition Day Membership - \$10.00</li> <li>Direct Debit: Commonwealth Bank</li> <li>BSE: 066 524</li> <li>Account No: 1009 2618</li> <li>Post to Bakers Hill ARC PO Box 745 Northam WA 6401</li> </ul> EFT receipt number and date of transfer (if applicable):           SIGNATURE OF MEMBER:           DATE:               EMERGENCY CONTACT AND MEDICAL INFORMATION               Benergency Contact Name: <li>Contact No:</li> <li>Modical Conditions / Allergies etc.,</li> <ul> <li>Private Health Insurance Company &amp; Number</li> <li>Ambulance Subscription Numbers</li> </ul> <ul> <li>Is compulsory to wear a safety standard approved * riding helmet when mounted on a horse at all adult riding rallies and club events.* Approval Numbers AUS-3838 Euro EN1384, US-ASTNF1163 *</li> </ul> <ul> <li>MEMERSHIP FEES ARE NON REFUNDABLE</li> </ul> <ul> <li>Invoingit and reley assume all such risks, both known and unknow, even 1 arising form hores esportactiviles.</li> <ul> <li>Invoingit and reley assume all such risks, both known and unknown, even the negligence of the Equestrian Federation of Australia and/or the event organiser (hereafter referred to as the "Release") or others and 1 voluntaity PARICIPATE at my OWN RISK and</li></ul></ul>	DATE OF BIRTH: CONTACT No.:
Direct Debit: Commonwealth Bank BSE: 066 524 Account No: 1009 2618 Post to Bakers Hill ARC PO Box 745 Northam WA 6401 EFT receipt number and date of transfer (if applicable): SIGNATURE OF MEMBER: DATE: DATE: EMERGENCY CONTACT AND MEDICAL INFORMATION Emergency Contact Name: Contact No.: Doctor's Name: Contact No.: Medical Conditions / Allergies etc., Contact No.: Private Health Insurance Company & Number Ambulance Subscription Number It is compulsory to wear a safety standard approved * riding helmet when mounted on a horse at all adult riding rallies and club events.* Approval Numbers AUS-3838 Euro EN1384, US-ASTNF1163 * <u>MEMBERSHIP FEES ARE NON REFUNDABLE</u> Horse sports are a dangerous recreational activity and horses can act in a sudden and unprediclable (changeable) way, especially if fightened or hurt. There is a significant risk that serious INJURY or DEATH may result form thre agingence of the Equestrian Federation of Australia and chowledge the dangers associated with the consumption. I agree not to drive activities. Luderstand and acknowledge the dangers associated with the consumption. I agree not to drive alcohol or any direction of any organiser or official can result in the CANCELLATION or my participation in horse sport activities. Lunderstand and acknowledge the dangers associated with the consumption. I agree not to drive alcohol or any direction of any organiser or official can result in the CANCELLATION or my participation in the sport variang and to bedraf or my injury, death or property damage I may suffer that arises from my participation of any organiser or official can result in the CANCELLATION or my participation in the sport drivities. Lunderstand and acknowledge the dangers associated with the consumption. I agree to to drive alcohol or any direction of any organiser or official can result in the CANCELLATION or my participation in the sport where this is required under the relevant EA and FEI rules and regulations and agree to thin the relevant companiser or official and that any misco	
EMERGENCY CONTACT AND MEDICAL INFORMATION Emergency Contact Name:	Direct Debit:Commonwealth BankBSB:066 524Account No:1009 2618Post to Bakers Hill ARC PO Box 745 Northam WA 6401
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Dated:// Signature of Rider:	