

Entry Form - One Horse/Pony Per Entry Form

Horse/Pony Show Name: _____

Horse Registrations: EWA#: _____ SHC#: _____ Height: _____ hh

Rider Name: _____ EWA#: _____ SHC#: _____ PCWA#: _____

Age/DOB: _____ Phone: _____ Email: _____

2nd Rider: _____ EWA#: _____ SHC #: _____ PCWA#: _____

2nd Rider Age/DOB: _____

RING 1 & 2 - OFFICIAL Show Hack Show Pony Hunter Hack Hunter Pony Lead Rein 1 st Ridden <i>(PLEASE CIRCLE)</i>	Member: \$25.00 Non-Member: \$40.00	\$
RING 1 ONLY Shetland & Lead Rein	Member: \$15.00 Non-Member: \$30.00	\$
RING 3 – UNOFFICIAL (DAY MEMBERSHIPS, are not entitled to member entry fee, must pay Non-Member entry fee)	Member: \$25.00 Non-Member: \$40.00	\$
Second Rider	\$20.00	\$
DAY MEMBERSHIP (Payable if not EWA, SHC, RRC, PCAWA member)	\$20.00	\$
EWA LEVY per horse (Compulsory EWA MEMBERS)	\$7.00 per registered EWA registered horse	\$
GROUND FEE per horse (Compulsory)	\$10.00 per horse	\$10.00
AMENITIES FEE per competitor (Compulsory)	\$5.00 per competitor	\$5.00
	TOTAL	\$ _____

UNOFFICIAL COMPETITORS NOTE: IF YOU ARE PAYING DAY MEMBERSHIP YOU ARE NOT ENTITLED TO TAKE UP THE MEMBER'S ENTRY FEE, MUST PAY NON-MEMBER ENTRY FEE OF \$40

Signed: _____ Print Name: _____ Date: _____

By signing you agree that you have read & understood the above Rules & Disclaimer.

Failing to abide by these Rules & Disclaimer you will be deemed ineligible to compete and asked to leave the grounds immediately.

***** PRE-ENTRY OR ENTRY ON THE DAY *****

Entry form, bank confirmation, membership, height certificates & disclaimer statements
MUST be emailed to riversiderc2020@gmail.com

BSB: 302-162 | Acct No: 091-8223 | Acct Name: Riverside Riding Club

MUST BE COMPLETED BY ALL EWA, SHC, RRC, PCAWA MEMBERS

Member Dangerous Activity Acknowledgement

Equestrian Western Australia Incorporated

ABN 53 591 481 584



Full Name of participant (and of guardian if under 18 years)

.....
.....

Postal Address

.....

State Post Code Date of Birth.....

Membership No. (EWA, SHC, RRC, PCAWA)

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 a dangerous 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.

I understand and acknowledge the dangers associated with the consumption of alcohol or any mind altering drugs and agree not to drink alcohol or take drugs prohibited by law before or during any horse sports activities.

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 activities and my immediate removal from my horse **NO MATTER** where that may occur.

I agree to wear an approved helmet at all times whilst participating in the sport where this is required under the relevant EA and FEI rules and regulations.

I have had sufficient opportunity to read this Dangerous Activity Acknowledgement and fully understand its terms and sign it freely and voluntarily.

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 my minor child's involvement or participation in horse sport activities. I also agree to abide by the Parents Code of Conduct as it relates to Equestrian Sports. I understand that should I breach this Code of Conduct in any way I may be penalised for such a breach as determined by Equestrian Western Australia.

Dated: ____/____/____ Signature of guardian_____



ONLY COMPLETE IF YOU ARE NOT AN EWA / SHC / RRC / PCAWA MEMBER

Competition Membership Form & Release of Waiver of Liability

Participants in RIVERSIDE RIDING CLUB organised horse activity days, who are **not** registered & current financial members of Equestrian WA, Show Horse Council of WA, Pony Club Association of WA or Riverside Riding Club, upon completion of this form are deemed to be members of Riverside Riding Club for the day of competition only as detailed below.

Riders Full Name _____

Guardian's Full Name if Rider is un18yrs) _____

Address _____ P/Code: _____

Riders Date of Birth _____ Date of Event _____

RRC Day Membership No. (to be issued by RRC Representative).....

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I agree to wear an approved helmet at all times whilst participating in the sport where this is required under the relevant EA and FEI rules and regulations.

I understand that Riverside Riding Club does not accept any liability for the loss of, or damage to, vehicles, or any other goods or articles, and does not offer any personal insurance to riders.

I have had sufficient opportunity to read this Dangerous Activity Acknowledgement and fully understand its terms and sign it freely and voluntarily.

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 my minor child's involvement or participation in horse sport activities. I also agree to abide by the Parents Code of Conduct as it relates to Equestrian Sports. I understand that should I breach this Code of Conduct in any way I may be penalised for such a breach as determined by Equestrian Western Australia.

Dated: ____/____/____ Signature of guardian _____



2023 Membership Application Form

(1st January 2023 – 31st December 2023)

Members Name (s) _____

Address: _____

Phone: _____

Email: _____

☐

Riding Member \$50.00 annual fee

☐

Family Membership \$60.00 annual fee (all covered persons must be listed)

☐

Non-Riding Member \$15.00 annual fee

Disclaimer – The Riverside Riding Club accepts **NO** liability for any accident, loss damage or illness to horses, owner, riders, spectators or any other person whatsoever. Riders compete at their own risk. All riders must wear an approved safety helmet.

Sign: _____ Print: _____ Date: _____
(Parent or Guardian if under 18 years)

Please complete and email to riversiderc2020@gmail.com, payment can be made to:

BSB: 302-162 | Acct No: 091-8223 | Acct Name: Riverside Riding Club