## Day Participant Waiver and Liability Declaration Instructions for Open Sections



#### **Purpose of Form:**

The purpose of the Day Participant Waiver and Liability Declaration is to ensure appropriate insurance is in place to allow Non-Pony Club members the opportunity to ride Open Pony Club Sections upon the payment of the insurance fee levied by our insurers, or to claim an exemption if the rider holds appropriate insurance through their membership of a recognised organisation, or otherwise insured.

Pony Club Junior, Associate and Adult riding members of any state, through membership, have completed a Waiver and are automatically covered by PCA insurance and do not complete this form.

**Cost:** Non-Pony Club members and PCA/PCV members who cannot prove their PCA/PCV membership must pay \$15 per day of participation unless exempt by way of holding insurance (as per Page 2 -Liability Declaration) with an equine organization or hold their own insurance.

**Insurance Coverage:** There is no personal accident cover for Non-Pony Club members. This cover extends to Public Liability only.

**Who Completes This Form (both pages)?** All Non-Pony Club members, and any Pony Club member that cannot show their Pony Club card or prove Pony Club membership.

#### Day Participant and/or Guardian Instructions to Complete Form:

- Complete BOTH pages.
- All details of the Day Participant Waiver (page 1) must be completed
  - For participants aged under 18, the Waiver must be signed by the participant's Parent/Guardian.
- Complete the relevant details of the Liability Declaration (page 2).
  - o If the rider is a member of one of the listed equine associations, fill out the details of the equine association and the member number in the space provided.
  - Tick the box of the equine association the participant is a member of (if any).
  - For participants aged under 18, the Liability declaration must be signed by the participant's Parent/Guardian.

#### **Organising Committee Statement of Riding Requirements**

The organising committee must state what riding requirements (specifications) apply for each grade/class/section of the competition/activity. The specifications must be detailed on the entry information before accepting an entry. The statement must advise: -

- A) Which grade the specifications will be equivalent to, if applicable
- B) Maximum jump heights and spreads, if applicable

#### **PCV Club Members and Interstate Pony Club Members**

- The 'grade/riding specification' selected by a Pony Club member in an open section may be different to the grade(s) on the PCV member card.
- Pony Club members may ride in an open and/or a pony club section, but not in the same grade, on the same mount except in horse trials.

ORGANISING COMMITTEE USE ONLY			
Name of Participant			
Day Attendance fees paid \$	Receipt No		
Name of event secretary/nominee collecting form:			
Signature:	Date:		
\$15 fee per day:			

The host club must remit all the fees collected as **one payment plus**, an official **Day Attendance Summary** form to the PCV State Office, 73-75 MACKIE RD, MULGRAVE. VIC. 3170 within seven working days.

### Day Participant Waiver Pony Club Australia Inc.

Participants in events organised by PCA Clubs, who are not current financial members of a PCA Club, or who cannot prove current PCA membership, or who do not have any other approved insurance in place, upon completion of this form are deemed to be "Day Participants" of the

Protection is afforded to the Day Participant under the PCA Public Liability policy, only whilst participating in activities organised and/or run by the PCA Club at that event, where they are liable for causing bodily injury or property damage to others, excluding whilst travelling to and from such event. By completing this form, you agree to abide by the Rules & Conditions of the PCA and any Rules of the event. An insurance contribution fee of \$15 per day is payable for Day Participants who do not have current and proven insurance with an equestrian organisation listed overleaf at the Liability Declaration.

Full	II Name of attendee and guardian (if under 18 years:)		_ Date of birtl	ר:
Add	ddress:Sta	te:	Post	Code:
Hor	orses name(s):			
Eve	rent/Activities: Date of Event/Activities:			
Add	ddress of Event/Activity:			
	ame of Organising Club:			
Hor	orse Sports are a Dangerous ctivity			
I, th	he undersigned, in consideration for being permitted to participate in any way in horse sport activities cept that:	and in p	particular this	event, acknowledge and
•	Horse sports are a dangerous recreational activity and horses can act in a sudden and unpredictable	way, es	especially if frig	htened or hurt.
•	There is a significant risk that serious injury or death may result from horse sport activities and in particular such risks, even if arising from the negligence of PCA and/or the event organiser / official.	rticular	r this event an	d freely assume all
•	I voluntarily participate at my own risk and assume sole responsibility for any injury, death or proper participation in horse sport activities.  I understand and acknowledge the dangers associated with the consumption of alcohol or any mind activity and I take full responsibility for any injury, loss or damage associated with their consumption I agree to follow the directions of any event organiser or official and that any misconduct or refusal torganiser or official can result in the cancellation of my participation in the event and my immediate that may occur. I further agree to abide by the Rules and Conditions of this show and the official Rule understand that any such non-compliance may result in injury, death and/or permanent disability armade by any person as a result of my failure to comply.  I agree to wear a helmet at all times whilst riding and agree that I am solely responsible for ensuring while riding and take sole responsibility for my actions.  I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby rele the proprietors of the Pony Club Australia Inc and/or the event organiser, their officers, officials, voluother participants, sponsoring agencies, sponsors, state bodies, affiliated clubs and if applicable, own the activities (all of whom are referred to as "Releasees") with respect to any and all injury, disability, property, whether caused by the negligence of the releasees or otherwise.	altering  altering  by me to remove Book  and Lagre  that Lv	ng drugs before to follow any c val from my ho of Pony Club ree to indemni wear a suitable	e and during the direction of any arse no matter where Australia Inc. I fyPCA against all claims e helmet at all times
•	the activities (all of whom are referred to as "Releasees") with respect to any and all injury, disability, 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 assumptist terms, understand that I have given up substantial rights by signing it, and sign it freely and volun understand that my signature to this document constitutes a complete andunconditional release of greatest extent allowed by law in the event of me and/or the children under my care, suffering injury.			
Dat	ated: Signature of Participant:			
For ack my chil	or Participants of Minority Age (Under Age 18) - This is to certify that I, as a parent/guardian with legal rok knowledge, understand and accept all of the above and consent and agree to his/her release as provide y heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from ild's involvement or participation in horse sport activities and in particular, this event, even if arising from	esponsi ed abov any an om the	sibility for this ove of all the Re nd all liabilities e negligence of	participant, eleasees, and, for myself, arising from my minor the Releasees.
Dat	ated: Signature of Parent/Guardian:			





### Liability Declaration Pony Club Australia Inc.

# Every Day Participant (Non-Member) Must Complete This Form

Please	e Tick The Appropriate Box:		
	I am a current member of an equine association, and/or I holiciability insurance to the minimum limit of \$10,000,000 per of the equine association I am a member of: and my membership / policy number is: I understand that I will not be covered under the PCA Insurant against me.		
	I am not a member of any of the below and do not have a cu complete the Registered Participant Application. I am aware travel to and from this show. I am also aware that no Persor	urrent Public Liability policy with a minimum of \$10,000,000 cover so will that this is not Personal Liability Insurance so cover does not extend to cover hal Accident cover is provided.	
Please t	tick if you are a member of:		
	Equestrian Australia (please note you must be a direct meml	ber of your state branch and not just an affiliated club).	
	☐ Arabian Horse Society of Australia (please note you must be a financial member of the AHSA and not just an affiliated club).		
	☐ Inter-State Pony Club / Pony Club Victoria /HRCAV (Please circle).		
☐ Other (please specify):			
	I hold my own personal liability policy for my equestrian acti and I attach my Certificate of Currency.	vities. The insurance company is:	
In considerate and he/she is oromiss negliger the Pongaran in the properties and the properties are negligerated as a properties and the properties are negligerated as a properties are negligerated	ideration of your accepting my participation, I hereby undertak gainst or suffered by the organising body by reason of any negl is attending, riding, driving or otherwise handling any horse so sion on the part of such rider, driver, handler or attendant foun nt for the purpose of any claim under this indemnity. Further, I ny Club Australia and/or contained in any official schedule and	e to indemnify the organising body against all claims, losses, suits and damages ligent act or omission on the part of any rider, driver, trainer or attendant whilst entered or any other horse owned or entered by me, and I agree that any act id in any action against you to be negligent shall be deemed to have been agree to abide by the Rules & Conditions and current Rule Book as laid downby I also agree to abide by all of rules regarding use of the venue and its facilities	
Print Na	ame:	Dated:	
Signed:		Contact Phone Number:	
For Part	ticipants of Minority Age (Under Age 18)		
This is to consent indemni activitie	to certify that I, as a parent/guardian with legal responsibility for t and agree to his/her release asprovided above of all the Relea hify and hold harmless the Releasees from any and all liabilities es and in particular, this event, even if arising from the negliger	or this participant, acknowledge, understand and accept all of the above and asees, and, for myself, my heirs, assigns, and next of kin, I release and agree to arisingfrom my minor child's involvement or participation in horse sport accept the Releasees.	
Signed:		Contact Phone Number:	

