

Please mail this form, together with fees to: Gympie Horse & Rodeo Assoc. Inc.

PO Box 273
Gympie. Qld. 4570

APPLICATION/RENEWAL MEMBERSHIP FORM

First Name: _____ First Name: _____
Surname : _____ Surname : _____
Other family Members (Juniors 18 years & under, please supply date of birth)
_____ (dob: _____)
_____ (dob: _____)
_____ (dob: _____)

Postal Address: _____

Postcode: _____
Email: _____
(Please print clearly)
Phone No. (____) _____

FEES:
Individual Membership (15ys & over).....**\$50.00** Family Membership.....**\$70.00** Non Riding Membership.....**\$40.00**

I am interested in the following aspects or horsemanship (please tick)

I am able to help out, or would like to learn how to:

Campdraft	Cutting	Dressage	Novelties	Rodeo
Schools	Jumping	Team Penning	Timed Events	Trail Riding

Caterers Assistant	Penciller	Organiser	Scorer	Judge (Please Specify)
Worker at working Bees				

Club grounds are situated in Jane St/Brewery Rd, Gympie. Membership entitles you use of the grounds and equipment (except when being used for competitions/schools etc) excluding the use of lights and cattle equipment. Members are expected to be considerate of others and put away equipment after use. An Executive Member should be notified when a member wants to use the grounds. Members receive a monthly newsletter. The club holds General Meetings at the Club House on the **3rd Thursday of every month at 7:30pm**. All Members are welcome. All work in maintaining the facilities, organising/running events and fund raising is carried out voluntarily by fellow members. **All Members are expected to assist where and when possible and must assist when competing in an event.** Members are encouraged to offer assistance rather than wait to be asked!

IN JOINING GYMPIE HORSE & RODEO ASSOCIATION INC, I AGREE TO COMPLY WITH CLUB RULES

LIABILITY WAIVER FORM EXCLUSION OF CERTAIN RIGHTS TO SUE

The purpose of this agreement is to limit the liability of the Provider to exclude liability for any personal injury or death the Participant and other people in the care and control of the Participant howsoever caused who signed this form as acknowledgment of the terms and conditions of the agreement. By signing this form you are waiving your rights to sue the Provider for losses relating to personal injury or death. Under the provisions of the Trade Practices Act and Various State Laws conditions are implied into contracts that mean that the Provider of Recreational Services, noted below, is required to ensure that the Recreational Services it sells to you are: rendered with due care and skill, are fit for the purpose for which they are commonly bought as it is reasonable to expect in the circumstances or might reasonably be expected to achieve the result you have made known to the Provider.

The Participant acknowledges that the activity being undertaken is an activity being undertaken for the purposes of recreation, enjoyment or leisure which involves a significant degree of physical risk. The Provider acknowledges that they are providing Recreational Services detailed below which means; providing facilities for participation in a Recreational activity, or training a person to participate in a recreational activity, or supervising, adjudication, guiding or otherwise assisting a person's participation in a recreational activity.

The Participant hereby acknowledges that in attending the recreational activity that there are inherent risks involved to him or her or other people in their care and control. This agreement is directed and limited to inherent risks that are patent. The participants also acknowledges that the purpose of the recreational activity is for the benefit of the Participant and for the benefit of those people attending with the Participant and that at all times the Participant is responsible for his or her own actions and the actions of those other people in his or her care

and control.

Description of Recreational Services:

HORSE RIDING & COMPETITION OF THE AUSTRALIAN QUARTER HORSE

Steps taken by the Australian Quarter Horse Association to avoid the danger of personal injury or death:

1. Providing assistance to Affiliates to support those Affiliates in the safe conduct of their activities.
2. Implementation of a risk management approach to events sanctioned by the Association.
3. Publication of resources to support the risk management approach of the Association and its Affiliates.
4. Implementation of the rules and regulations as agreed by the Board of Directors of the Association.

The Participant acknowledges that during all times while he or she is attending the recreational activity, he or she does so at his or her own risk, and that the Participant, and other people in the care and control of the Participant, will not hold the Provider or any of its employees or agents liable for any personal injury or breach of contract whether caused by the negligence of the Provider its employees or agents howsoever caused or otherwise. The Participant acknowledges that in the event that he or she or any other people in their care and control find either or any of them is in difficulty that they are to stop the activity or request that the activity be stopped if appropriate, and seek help and/or assistance and advice.

Name and address of Provider: Australian Quarter Horse Assoc.
131 Gunnedah Road, TAMWORTH. NSW 2340

Declaration and Signature: By signing this agreement I/we understand that the Recreational Services, as set out in this form, may cause my/us and or my/our dependants personal injury or death. By signing this agreement I/we understand that I/we and my/our dependants waive our rights to sue the Provider for losses relating to my/our and or my/our dependants personal injury or death that result from any negligence caused by the Provider.

All persons covered under this membership must be noted in this section:

Name..... Signature..... Date.....
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Name and Signature of Legal Guardian (if participant is U/18) Name..... Signature..... Date.....