Liability Declaration For Day Members At "Open Events" Only

The Arabian Horse Society of Australia Ltd

EVERY DAY MEMBER WHO WILL BE A HANDLER, RIDER, DRIVER, GROOM & ANYONE HANDLING A HORSE OR PONY MUST COMPLETE THIS DECLARATION.

OWNERS OF ALL REGISTERED ARABIANS AND ARABIAN DERIVATIVES MUST BE CURRENT FINANCIAL MEMBERS OF THE ARABIAN HORSE SOCIETY TO BE ELIGIBLE TO COMPETE.

"Open Event" shall mean a Non-Arabian event including Dressage, Hacking, Rider and Harness classes only, or otherwise agreed by the Arabian Horse Society of Australia Ltd.

Plea	ase tick one of the below boxes which applies to yo	ou:	
	with 24/7 Public Liability insurance to the minim	n, and / or I hold a current insurance policy, which provides mount limit of \$10,000,000 per occurrence. My membership / Police attached a photocopy of my Membership Card / Insurance Police.	
	I am not a member of any of the above and do not have a current Public Liability policy with a minimum of \$10,000,000 cover so will complete the Application for Day Members and tender the appropriate fee of \$10.00 per day (includin GST) to cover the cost of participation with this affiliate group for each day of this event. I am also aware that this is not Personal Liability Insurance so cover does not extend to cover travel to and from this show.		
clair omis han part	ms, losses, suits and damages made against or s ssion on the part of any rider, driver, trainer or a dling any horse so entered or any other horse ow	I hereby undertake to indemnify the organising body against a suffered by the organising body by reason of any negligent act of tendant whilst he / she is attending, riding, driving or otherwished or entered by me, and I agree that any act or omission on the in any action against you to be negligent shall be deemed to have sindemnity.	
of A		and current Rule Book as laid down by the Arabian Horse Socie schedule and I also agree to abide by all of the showground rule	
Prin	t Name:	Date:	
Sign	ned:	Contact Phone Number:	
For P	articipants of Minority Age (Under Age 18)		
acce my l liabi	ept all of the above and consent and agree to his / I neirs, assigns, and next of kin, I release and agre	al responsibility for this participant, acknowledge, understand an ner release as provided above of all the Releasees, and, for mysel e to indemnify and hold harmless the Releasees from any and a participation in horse sport activities and in particular, this even	
Sign	nature of Parent / Guardian:	Date:	

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