

ADELAIDE HILLS DRESSAGE CLUB INC.
3 Charles Street, WOODSIDE SA 5244

Please note that Annual Subscriptions become due and *payable on 1st July* each year.

PRESIDENT: Noel Vears

TREASURER: Sally Engelhardt

SECRETARY: Sally Wells

The cost for members per test is:

Official Days-Members: \$18.00 Seniors and \$15.00 Young Riders/Juniors. All plus levies.

Non AHDC & non EFA: \$26.00 Seniors and \$20.00 Young Riders/Juniors plus \$20.00 day membership. All plus levies.

Associate Classes: Fees apply as above.

Club Days-Members: \$16.00 Seniors and \$13.00 Young Riders/Juniors. All plus levies.

Non AHDC & non EFA: \$21.00 Seniors and \$21.00 Young Riders/Juniors plus \$20.00 day membership/insurance plus levies.

EFA ONLY MEMBERS: Fees apply as above. No day membership required. All plus levies.

Please indicate below whether you wish to receive Moving Forward magazine – 6 issues per year.

Please nominate below your preferred date/s and area of assistance.

Name: Mr/Mrs/Ms/Miss: -----

Address: -----

----- Postcode: -----

Phone: (H) ----- (W) ----- E-mail: -----

Date of Birth: ----- (Young Riders & Juniors only)

Description	Amount	To be paid
Joining fee (new members/memberships not current in 2008)	\$10.00	\$
Moving Forward newsletter	\$20.00	\$
Senior Member	\$50.00	\$
Junior Member (under 17 years of age)	\$30.00	\$
Associate Member (18 years and over, Non rider)	\$25.00	\$
Family Membership	\$80.00	\$
TOTAL		\$

Post to: Secretary, 3 Charles St, Woodside SA 5244
 (Cheques to be made payable to: **THE ADELAIDE HILLS DRESSAGE CLUB INC.**)

*****Please indicate with a tick which days you can assist us**

July 2008	Aug 2008	Sep 2008	Oct 2008	Nov 2008	Dec 2008
Jan 2009	Feb 2009	Mar 2009	Apr 2009	May 2009	June 2009

*****Please indicate with a tick which area you can assist us**

Setting up Arenas	Judging	Computing	Pencilling	Other
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Member Release and Waiver of Liability

The Equestrian Federation of Australia
ACN 077 455 755 ABN 19 077 455 755



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

Address.....

StatePost Code.....Date of birth.....

Name of Club/Organisation ADELAIDE HILLS DRESSAGE CLUB

Membership No.

Address of Event / Activity

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 recreational 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 knowingly and freely assume all such risks, both known and unknown, and **I voluntarily PARTICIPATE** at my **OWN RISK** and assume sole responsibility for any injury, death or property damage I may suffer that arises from my participation in horse sport activities.

I understand and acknowledge the dangers associated with the consumption of alcohol or any mind altering drugs before and during the activities and I take full responsibility for any injury, loss or damage associated with their consumption. I 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 understand that any such non-compliance may result in injury, death and/or permanent disability as a result of my failure to comply.

I agree to wear a helmet at all times whilst participating in the sport where this is required under the relevant EFA and FEI rules and regulations, and agree that I am solely responsible for ensuring that whilst participating I wear a suitable helmet at all times where required under the relevant EFA and FEI rules and regulations, and take sole responsibility for my actions.

I have had sufficient opportunity to read this assumption of risk agreement, 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.

Dated: ___/___/___ Signature of guardian _____