



- FULL** : For individual persons
- COUPLE** : Married or defacto living at the same address
- CONSTITUENT** : For studs, companies etc
- JUNIOR** : For individual persons 18 years & under
- LIFE** : Any individual member may be admitted as a life member on application
- FIRST TIME OWNER** : For Individuals who are Registering or Transferring their first Appaloosa Horse and have not been a member of AAA previously.

I/we hereby apply for membership with the Australian Appaloosa Association Ltd, and am aware that in the event of the Company being wound up I am liable to a contribution towards the debts and liabilities of the Company to an amount not exceeding \$20.00 and I undertake to abide by the Memorandum & Articles of the Company and any By-Laws made by The Board of Directors. I/we also hereby acknowledge and agree that the Australian Appaloosa Association Ltd can use the details provided in this Membership form for statistical analysis, promotion or provision to Government for emergency purposes and for notification to members and for no other purpose.

MEMBERSHIP APPLICATION

Membership Number (Renewals Only): _____

FULL NAME: _____

Nominee (Constituent Membership Only): _____
 (For Studs, Companies etc Only. The Nominee is the only person eligible to sign, vote or show on behalf of the membership)

Phone () _____ Mobile: _____ Fax: _____

Address: _____

_____ Postcode: _____ E-Mail: _____

_____ Date of Birth (Youth): _____

Signature of Applicant _____ (Please attach a copy of birth certificate for new youth members)
 NB: Youth members must have a Parent/Guardian Co-Sign

(As part of the AAA Ltd Emergency Response Strategy, we request all members supply a mobile and email address for notification in emergency situations. This information should be kept current at all times.)

For your membership to be processed you must sign the insurance waiver on the back of this form

Please tick

- | | | |
|---|----------------------|-----------|
| <input type="checkbox"/> Full Membership | (Includes Magazine)* | \$170.00 |
| <input type="checkbox"/> Couple Membership | (Includes Magazine)* | \$235.00 |
| <input type="checkbox"/> Constituent Membership | (Includes Magazine)* | \$170.00 |
| <input type="checkbox"/> Youth Membership | (Includes Magazine)* | \$116.00 |
| <input type="checkbox"/> Leadline Membership (2 to 10yrs) | (Excludes Magazine)* | \$20.00 |
| <input type="checkbox"/> Life Membership | (Excludes Magazine) | \$1500.00 |
| <input type="checkbox"/> First Time Owner | (Includes Magazine)* | \$85.00 |
| <input type="checkbox"/> Non Members Magazine Subscription only | | \$70.00 |
- (For International Subscribers add an extra \$22.00)

*One magazine per household is compulsory (deduct \$70.00 for second and subsequent memberships).

MASTERCARD / VISA (A surcharge of 3% will apply to credit card transactions)

Card Number: _____ / _____ / _____ Expires: _____ / _____

Card Holder Name: _____ Signature: _____

Australian Appaloosa Association Ltd

Email: info@appaloosa.org.au

Website: www.appaloosa.org.au

Ph: (02) 6765 7969 Fax: 6765 7515

PO Box 3212 West Tamworth NSW 2340

ABN: 70 001 558 050



**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 to 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 this 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.

Name and address of Provider: **AUSTRALIAN APPALOOSA ASSOCIATION
PO BOX 3212, WEST TAMWORTH NSW 2340**

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, adjudicating, 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 APPALOOSA ASSOCIATION

Steps taken by the Australian Appaloosa 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 of the 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.

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
.....
.....
.....
.....

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

Name:..... Signature:..... Date:.....