



Darwin Dressage Club Inc

Application for Membership – 2008

Membership year: 1 January – 31 December

(Only 1 membership type per form please)

Membership inquiries:

Secretary: Fiona Harburn
PO Box 38231, Winnellie, NT
0821.

DarwinDressageClub@telstra.com

www.equestrian-nt.com.au/ddc

DDC is now offering an Early Bird membership rate for Memberships paid before 15th January 2008.
We are also no longer charging a joining fee for new members.

Membership Type:		Early Bird price	Or After Jan 15, 2008	Amount
Junior	Under 18yrs (at time of joining)	\$50.00	\$60.00	\$.00
Senior	18yrs and over	\$60.00	\$70.00	\$.00
Family	Parents & any number of dependent children of same family	\$70.00	\$80.00	\$.00
Honorary -	A Life Member who intends on competing	\$30.00	\$30.00	\$.00
Day	Applicable for 1 day (any age) enables participation in DDC Event	\$20.00	\$20.00	\$.00
Day membership is only available for a maximum of 3 events				
EFA discount (only 1 discount per family membership) – <u>proof of membership required</u>		\$5.00	\$5.00	-\$.00
EFA No.'s:			Sub Total	\$.00

DONATIONS: Interstate and / or Intrastate funds \$
Amount enclosed **\$.00**

Payment can be made by:

direct deposit to the DDC account

OR cheque (made out to the Darwin Dressage Club)

Bank: National Australia Bank
 Account name: Darwin Dressage Club Inc
 B.S.B: 085-992
 Account number: 508176939

If membership fees direct debited to DDC account please fill in details below:

Transaction Notation: _____ & date: ____ / ____ / ____

By signing this membership form, I / We agree to abide by the rules and by-laws of the Darwin Dressage Club Inc, as set out in the Constitution, By-laws, Rulebooks and Publications AND to attend, or replace myself, at three (3) arena setups, (as per the Arena Roster) or I / We may forfeit the right to attend further competitions.

NAME - 1: _____ Signed: _____ Today's Date: ____ / ____ / ____
 Age Demographic: < 18yrs DOB: ____ / ____ / ____ 18 – 30yrs 31 – 40yrs > 40yrs

NAME - 2: _____ Signed: _____ Today's Date: ____ / ____ / ____
 Age Demographic: < 18yrs DOB: ____ / ____ / ____ 18 – 30yrs 31 – 40yrs > 40yrs

NAME - 3: _____ Signed: _____ Today's Date: ____ / ____ / ____
 Age Demographic: < 18yrs DOB: ____ / ____ / ____ 18 – 30yrs 31 – 40yrs > 40yrs

NAME - 4: _____ Signed: _____ Today's Date: ____ / ____ / ____
 Age Demographic: < 18yrs DOB: ____ / ____ / ____ 18 – 30yrs 31 – 40yrs > 40yrs

PLEASE FILL IN DETAILS BELOW:

CONTACT DETAILS:

NAME: _____

Residential Address: _____

Postal Address: _____

Contact numbers - B/H _____ A/H _____

Mobile _____ Fax _____

Email 1 (primary) _____

Email 2 _____

PLEASE NOTE: All members must be prepared to attend a maximum of 3 arena setups, using a roster system.

Member Release and Waiver of Liability

Full Name of participant _____

(and Guardian if under 18 years) _____

Address: _____

State: _____

NT

Postcode: _____

Date of birth: _____

Name of Club/Organisation: _____

Darwin Dressage Club Inc (DDC)

Address of Event/Activity: _____

Fred's Pass Reserve / Darwin Royal Showground

In consideration of 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 PARTICPATE** 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 riding and agree that I am solely responsible for ensuring that I wear a suitable helmet at all times whilst riding 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/guardian: _____

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 rider/guardian: _____