

MACCLESFIELD PONY CLUB INC (A0007335R)

Combined Training & Dressage Day 26th January 2016

At The Macclesfield Pony Club Grounds, corner of Kennedy Rd & TsChampions Rd Macclesfield

Tuesday 26th January 2016

Entries Email: secretarymacclesfield@gmail.com or via mail

Combined Training & Dressage \$50, Combined Training only \$40, Dressage Only (2 tests) \$40

Entries Close: Strictly **FRIDAY 15TH JANUARY 2016** (or earlier if sections are full)

Times will be available on the Macclesfield Pony Club Website from late Wed 21st January 2016

Event enquiries/scratching: Kelly Reidle 0438 688 307

Additional enquiries: Nadine Jackson 0437 203 870

PONY CLUB & OPEN GRADES 3 – 5 ONLY

*Gates open at 7am *Canteen & office opens at 7.30am *Gear check opens at 7.30am

Please ** Note that Pure Dressage Gear Check rules Apply for Dressage only **.

The event will be conducted under the PCAV rules for combined training.

All dressage tests will be taken from PCAV dressage book 2013 Edition.

Dressage Only	Combined Training Only	Combined training show jumping max heights & spreads in metres	
		Max Height	Max Spread at highest point
	Open & PC Grade 5 – riders 8yrs and under – Test 5A	0.50m	0.50m
Open & PC Grade 5 – Test 5B & 5C	Grade 5 – Test 5B	0.50m	0.50m
Open & PC Grade 4 – Test 4B & 4C	Grade 4 – Test 4B	0.65m	0.65m
Open & PC Grade 3 – Test 3B & 3C	Grade 3 – Test 3B	0.80m	0.80m

- Dressage Arenas – Grades 3 in 60x20m & Grades 5 & 4 in 40x20m
- All Dressage Test are from the Feb 2013 edition of Dressage for pony Club available from the PCAV Website
- Entering the competition constitutes acknowledgement that PCAV rules apply & acceptance of these rules
- The organising committee reserves the right to cancel any class or competition, combine or divide any class, alter times, refuse any entry with or without stating a reason
- No refunds after closing date except with vet or medical certificate - \$10 administration fee applies
- PCAV Cards must be inspected at the secretary's office before riding
- Gear check is required for all riders 20 minutes before each phase
- Medical armbands MUST be worn by all competitors
- Complying helmets AS/NZS3838, EN1384, ASTM1163 or PAS015 must be worn & spot checks may occur
- Queries, protests, horse abuse & doping rules as per the PCAV By-Laws
- DOGS ARE PROHIBITED WITHOUT EXCEPTION
- Horses must be at least aged 4 to compete & no stallions, colts or rigs
- LUNGEING IS NOT PERMITTED ON THE GROUNDS
- MPC will supply back numbers, back numbers must be worn for all phases
- PCAV Alcohol policy applies to the event
- More than one horse can be ridden subject to the conditions of PCAV By Laws Multiple horse Rules
- Separating of equality of scores as per PCAV By laws
- Neither the organising committee of this competition nor the PCAV accepts any responsibility whatsoever for any accident, damage, injury or illness to horses, riders, ground spectators or any other person on the property

' Open Riders

- All Open riders must complete the **Liability Declaration Form**
- \$10 Day Participant Fee is due UNLESS you are a financial member* of PCAV; EV/EA; HRCV; AHSA; AERA; an Interstate Pony Club; or can prove personal Liability Cover of at least \$10,000,000. *Must produce proof.
- Riders without adequate Insurance Cover pay \$10 for Liability Only cover for the duration of the event. (Not personal Medical) and complete the Participant Waiver.
- PCAV club member cards must be inspected at the secretary's office.
 - **PCAV Insurance Policy specifically states anyone not following PCAV Rules may be left uninsured.**

MACCLESFIELD PONY CLUB - Combined Training & Dressage

Tuesday 26th January 2016

Entry Form

ENTRIES CLOSE – FRIDAY 15TH JANUARY 2016

OR EARLIER IF SECTION ARE FULL

Please return this page to: Event Secretary Macclesfield Pony Club
PO Box 622, Emerald, Victoria, 3782

Email Entries : secretarymacclesfield@gmail.com

CT only \$40

Dressage only \$40

CT and Dressage only \$50

Day Attendance Fee \$10 – Open Riders – please return PCAV LIABILITY DECLARATION FORM 2015-2016 with entry

Along with: Cheque or money order payable to- Macclesfield Pony Club
Bank deposit- Macclesfield Pony Club

BSB **013-623**
Account number **2821-40625**
Please use surname as I.D.

All entries must be accompanied by the correct fees, Day Participation Form, Bio Security Form and email address for times

Entry Fees:	Dressage Only (D) (two tests)	\$40.00	:	_____
	Combined Training (CT) (one test and one SJ)	\$40.00	:	_____
	Combined Training & Dressage (CT & D)(two tests and one SJ)	\$50.00	:	_____
Open Riders add:	Day Participation Fee	\$10.00	:	_____
	TOTAL	\$		_____

Clearly state your grade in each section below – One Entry Form Per Rider

RIDER (& Age for Test 5A)	MOUNT	CLUB	PCAV Grade		Open Grade	
			CT	Dress	CT	Dress

Please indicate payment method: (please circle) CASH CHEQUE DIRECT DEPOSIT*

Direct Deposit – Please include Receipt # _____ Date _____

*Direct Deposit is the preferred method of payment.

Please do not send cash in the mail. Cheques payable to "Macclesfield Pony Club Inc."

Mobile number	_____
Email address	_____

Please enclose a self-addressed envelope if you do not supply an email, so we can post your times.

Bio Security Form

Registered Name of the Horse and / or name as officially entered

.....

Address of property from which the horse will be moved to the event

.....

Address of property to where the horse will move after the event

.....

Health of Horse(s)

I declare that the horse named above will be in good health, eating normally and not showing signs of respiratory disease during the last 3 days leading up to this event. I give my authorisation for the Event Secretary to call for veterinary inspection of the horse/(s) named above and in my care should they be showing signs of a respiratory illness at any time during the course of the event. I agree to pay any veterinary fees incurred as a result of this veterinary examination.

Horse Event Declaration Waiver

I understand that due to diseases such as equine influenza, the Victorian Department of Primary Industries, or other State or Commonwealth government body, may restrict or prevent the movement of horses, vehicles and personnel for a period of time ("Standstill"). I acknowledge and agree that a Standstill is a risk of competing at this event and I agree to pay all costs or expenses incurred by PCAV as a result of a Standstill.

Biosecurity Guidelines

I have read and understand the PCAV Biosecurity Guidelines as read on the website www.ponyclubvic.org.au and I will act in accordance with these guidelines.

Refund Policy

I understand that the Macclesfield Pony Club will refund all entry fees if the event is cancelled prior to 48 hours before the event.

If the event is cancelled within 48hr before or during the event, the organising committee will refund less the value of already incurred expenses.

Rider's signature:..... Rider Name (printed) :

Dated.....2016

Guardian's signature:..... Guardian's Name (printed):

Dated.....2016

LIABILITY DECLARATION FORM 2015-2016

EVERY DAY PARTICIPANT/OPEN RIDER MUST COMPLETE THIS FORM



Event:	Date of Event:
Organising Body:	
Address of Event:	

PLEASE TICK THE APPROPRIATE BOX:

I am a current member of an equine association, and/or I hold a current insurance policy, which provides me with 24/7 Public Liability insurance to the minimum limit of \$10,000,000 per occurrence. The equine association I am a member of:

..... and My membership / policy number is:

I have provided my Membership Card / Insurance Policy / Certificate of Currency as proof of this insurance and if necessary* read, acknowledged & signed the Day Participant Waiver.

Please tick if you are a member of:

<input type="checkbox"/>	Equestrian Australia (please note you must be a direct member of your state branch and not just an affiliated club).
<input type="checkbox"/>	Arabian Horse Society of Australia (please note you must be a financial member of the AHSA and not just an affiliated club).
<input type="checkbox"/>	Pony Club Association of Victoria
<input type="checkbox"/>	Interstate Pony Club
<input type="checkbox"/>	Australian Endurance Riders Association
<input type="checkbox"/>	Other (specify)
<input type="checkbox"/>	HRCVA
<input type="checkbox"/>	OR I hold my own personal liability policy for my equestrian activities. The insurance company is: and I attach my Certificate of Currency.

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 **Registered Day Participant Waiver (below) and tender \$10.00 per person per day** (including GST) to cover the cost of participation with this Pony Club for each day of this event. I am aware that this is not Personal Liability Insurance so cover does not extend to cover travel to and from this event. I am also aware that no Personal Accident cover is provided.

Full Name:	D.O.B:
Address:	Postcode:
Signed: (Guardian under 18)	Contact Phone:

DAY PARTICIPANT WAIVER 2015-2016

Participants in events organised by PCAV Clubs, who are not current financial members of a PCAV Club, or who do not have any other approved insurance in place, upon completion of this form are deemed to be "Day Participants" of the event.

Protection is afforded to the Day Participant under the PCAV Public Liability policy, only whilst participating in activities organised and/or run by the PCAV Club at that event, where they are liable for causing bodily injury or property damage to others, excluding whilst travelling to and from such event.

By signing this form, you agree to abide by the Rules & Conditions of the PCAV and any Rules of the event.

For every Entrant who does NOT have a current and proven Public Liability insurance to the minimum of \$10,000.00 a payment is due of \$10.00 per person per day (including GST), to cover the cost of participation with this Pony Club for each day of this event.

Horse Sports are a Dangerous Activity

I, the undersigned, in consideration for being permitted to participate in any way in horse sport activities and in particular this event, acknowledge and accept that:

Horse sports are a dangerous recreational activity and horses can act in a sudden and unpredictable way, especially if frightened or hurt.

There is a significant risk that serious injury or death may result from horse sport activities and in particular this event and freely assume all such risks, even if arising from the negligence of PCAV and/or the event organiser / official.

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 activity and I take full responsibility for any injury, loss or damage associated with their consumption.

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 event and my immediate removal from my horse no matter where that may occur. I further agree to abide by the Rules and Conditions of this event and the official Rule Book of the Pony Club Association of Victoria. I understand that any such non-compliance may result in injury, death and/or permanent disability and I agree to indemnify PCAV against all claims made by any person 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 while riding and take sole responsibility for my actions.

I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release and hold harmless and agree not to sue the proprietors of the Pony Club Association of Victoria and/or the event organiser, their officers, officials, volunteers, coaches, agents and/or employees, other participants, sponsoring agencies, sponsors, state bodies, affiliated clubs and if applicable, owners and lessors of premises used to conduct the activities (all of whom are referred to as "Releasees") with respect to any and all injury, disability, death, or loss or damage to person or property, whether caused by the negligence of the Releasees or otherwise.

Effect of this Document - I have had sufficient opportunity to read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without inducement of any kind. I understand that my signature to this document constitutes a complete and unconditional release of all liability of the Releasees, to the greatest extent allowed by law in the event of me and/or the children under my care, suffering injury or death.

In consideration of your accepting my participation, I hereby undertake to indemnify the organising body against all claims, losses, suits and damages made against or suffered by the organising body by reason of any negligent act or omission on the part of any rider, driver, trainer or attendant whilst he/she is attending, riding, driving or otherwise handling any horse so entered or any other horse owned or entered by me, and I agree that any act or omission on the part of such rider, driver, handler or attendant found in any action against you to be negligent shall be deemed to have been negligent for the purpose of any claim under this indemnity.

Further, I agree to abide by the Rules & Conditions and current Rule Book as laid down by the Pony Club Association of Victoria and/or contained in any official event schedule and I also agree to abide by all of the Event Venue rules regarding use of their centre and its facilities.

Full Name:		D.O.B:
Address:		Postcode:
Signed:	Contact Phone:	

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 his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities arising from my minor child's involvement or participation in horse sport activities and in particular, this event, even if arising from the negligence of the Releasees.

Full name of Rider:		D.O.B:
Address:		Postcode:
Full Name of Guardian:		Contact Phone:
Signed:		

Gow-Gates Insurance Brokers
 Pty Ltd, Level 8, 491 Kent Street, Sydney, NSW, 2000
 P : (02) 8267 9999 F: (02) 8267 9998 E: equestrian@gowgates.com.au
 ABN 12 000 837 785 | AFSL 245432

