



MEMBERS CHECKLIST

When submitting your membership applications for the year please make sure you have done the following:

- Signed acknowledgement waiver to accompany membership application
- Junior memberships must have parent/guardian signature
- Annual Logbook Return Form to accompany membership application
- If your horse is on Annual registration – complete annual horse registration form

Cheques/money orders to be made payable to NSW Endurance Riders Association Inc.

CREDIT CARD PAYMENT ADVICE

I/We wish to pay by: Bankcard Mastercard Visa AMOUNT \$

Credit Card Number:

Expiry Date:

Cardholder's Name:

Cardholder's Signature

Post the completed form/forms to: NSWERA Registrar, PO Box 6627, CHATHAM NSW 2430
or Scan/email to: nswera@westnet.com.au or fax to : 65538 661

FOR MORE INFORMATION ON HOW TO COMPLETE THESE FORMS, PLEASE CONTACT THE NSW REGISTRAR: SONYA RUPRECHT 65538640 / 0409539523

NSW ENDURANCE RIDERS ASSOCIATION

ABN 66 856 011 605



2012 MEMBERSHIP APPLICATION/RENEWAL FORM

Applications must be made correctly on this form & include the signed waiver & correct money

Membership Registrar: PO Box 6627 Chatham NSW 2430 PH: 6553 8640 / 0409539523

Fax: 6553 8661 Email: nswera@westnet.com.au

I. MEMBER DETAILS

NEW MEMBER (please tick)

Name 1 Last known membership No..... Year.....

Name 2 Last known membership No..... Year.....

Residential Address Post Code

Postal Address (only if different) Post Code

Phone No. Email Address

(Email may be used by NSWERA to communicate with members)

If Junior, date of birth Under AERA Rules juniors become adults from the beginning of the year in which they turn 18 years old.

Please tick the appropriate box to receive a newsletter by post. Newsletters with low-resolution photos are available for download from the NSW website free of charge.

2. 2012 FEES

(tick which applies)

Amount

<input type="checkbox"/> Adult With Newsletter \$190.00	<input type="checkbox"/> Qualified	<input type="checkbox"/> Novice	Qty	\$.....
<input type="checkbox"/> Adult Without Newsletter \$160.00	<input type="checkbox"/> Qualified	<input type="checkbox"/> Novice	Qty	\$.....
<input type="checkbox"/> Junior With Newsletter \$140.00	<input type="checkbox"/> Qualified	<input type="checkbox"/> Novice	Qty	\$.....
<input type="checkbox"/> Junior Without Newsletter \$110.00	<input type="checkbox"/> Qualified	<input type="checkbox"/> Novice	Qty	\$.....
<input type="checkbox"/> Associate \$35.00 (non-riding / non-voting / including newsletter)			Qty	\$.....
<input type="checkbox"/> Family \$400.00 (If requiring a newsletter please tick the appropriate box)			Qty	\$.....
<input type="checkbox"/> Newsletter..... \$30.00			Qty	\$.....
<input type="checkbox"/> Tick if you require a receipt			Total	\$.....

3. FAMILY FEE

*\$400 family membership as being up to four persons residing at the one address in a bona fide family relationship with extra juniors costing \$50.00 each..

2. Name Date of Birth Membership No.

3. Name Date of Birth Membership No.

4. Name Date of Birth Membership No.

4. NSWERA

will refund \$10.00 off the membership fee for people who join for the 1st time after paying day membership. This is for new people joining for the first time ie. not renewals and so long as they join and pay within 21 days. If however you are a full member and cannot produce your membership card at a ride and then pay a Day membership fee and ride in a trainer, then the Day membership fee will be refunded upon application to NSWERA Inc.

Tick if you DO NOT want your contact details made available to other NSWERA members.

Personal information provided is only used by NSWERA to keep an accurate register of members and to pursue NSWERA objectives, according to the NSWERA Inc. Rules. AERA is provided with membership details from the Register.)

I hereby apply for membership of the NSWERA INC in 2012. I include the correct fee and my **signed waiver**. If accepted as a member I agree to comply with the NSWERA constitution and AERA and NSWERA rules which I accept.

Signed Signed: Signed

Signed Date:

(Parent or guardian to sign for juniors)

Application must include a signed waiver.



AUSTRALIAN ENDURANCE RIDERS ASSOCIATION INC.

MEMBERS DANGEROUS ACTIVITY ACKNOWLEDGEMENT

In consideration of the New South Wales Endurance Riders Association Inc. ("the Association") permitting me to participate in an event conducted by the Association:

This agreement is compulsory and is entered into by:

Participant 1 Name: Membership No:

Participant 2 Name: Membership No:

And covers my participation in all endurance riding activities affiliated with or endorsed by the Association.

I understand that –

1. There are potentially significant risks and hazards involved with endurance riding, and that horses are powerful and potentially dangerous animals;
2. There are certain inherent risks in the terrain, public roadways, weather and other forces of nature which may arise during my participation in endurance riding, and that such risks may vary from ride to ride;
3. The Ride Organisers and the State Management Committee make every effort to ensure the safety of the ride base and ride course, and the safety and well-being of all participants and their horses, and to minimize any risk of injury, death or loss due to negligence or omission by the organisers and the Association;
4. It is compulsory to wear an approved safety helmet at all times while on a horse at any event affiliated or endorsed by the Association;
5. I am responsible for the control and welfare of any horse in my care or which I elect to ride and for ensuring that I am capable of managing any such horse in the interests of my own safety, and that of other participants, horses and property;
6. If I fail to comply with any reasonable instruction, request or direction by Ride Organisers or other designated officials, upon my being so warned by the appointed Chief Steward, she/he may terminate any further participation by me, such termination being at my expense, and I waive any claim or refund;
7. I am free to withdraw my participation at any time should I determine that to do so is in the interests of my safety and well-being or that of other participants and horses.

I agree –

8. That if I have a medical condition or impairment which may affect my capacity to act safely and in the best interests of the welfare of myself, other participants and horses, then I take full responsibility for any consequence of such medical condition or impairment;
9. To comply with AERA and the Association's Ride Rules and any reasonable instruction, request or direction from ride officials as to the safety and well-being of myself and other participants, and the management of horses;
10. That due to diseases such as equine influenza, the 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, otherwise known as a "standstill". I acknowledge that a standstill is a risk of competing and agree to pay any costs or expenses incurred by any person or organisation for and behalf of my horse(s) as a result of the standstill.

I have read and understood the above document

Signature of Participant 1: Date:

Medical Conditions:

Signature of Participant 2: Date:

Medical Conditions:

Declaration by guardian:

As guardian of the participant:

1. I warrant the accuracy of the assurances and warranties given above on behalf of the participant;
2. I provide the above undertakings both on my own behalf, and, to the extent permitted by law, on behalf of the participant; and I indemnify the Association and all the persons specified above against all liability and claims brought by or on behalf of the participant arising out of or in any way associated with the activity.

Name of participant/s:

Name of Guardian: Signature: Date:

DO NOT FORGET TO COMPLETE THE MEMBERSHIP CHECKLIST!



AUSTRALIAN ENDURANCE RIDERS ASSN. INC.

ANNUAL LOGBOOK RETURN

Current Horse Details

To help maintain a current register of all AERA Logbook horses, please fill out relevant details of all endurance horses in your care and return to your State Registrar with your membership form. Membership may be withheld if this form is not attached.

Owner/Agent Name: _____

Address: _____

Postcode: _____ Membership Number: _____

Name of Horse	AERA No.	End / Novice

To assist in maintaining our records, please advise of any horse that has a logbook that is no longer competing for any reason. e.g. retired, sold, died etc.

Name of Horse	AERA No.	Reason

If the horse has been sold please provide details.

Name of Horse	AERA No.	Sold to another member (give name)	Sold & no longer in sport	Sold overseas

If there is insufficient room on this form, please attach additional details.