# TEERA MEMBERSHIP APPLICATION - 2010

Return completed form (together with proof of rider status if appropriate) plus the correct membership fee (make any cheques payable to TEERA Inc.) to:

TEERA Membership Registrar, Pat Lamprey, 125 Smith & Others Road, SASSAFRAS 7307. Ph: 6426 7259

## Applicant details

| | |
|---|---|
| Applicant name: | Membership number: Riding No: |
| Home address: | Post Code: |
| Home phone: | Date of birth (under 18 only): |
| I wish to *apply for / renew membership of the Tasmanian Equine Endurance Riders Association Inc., and enclose $ as the required fee payment.<br><br>(*Cross out the term which is not applicable) | |
| Applicant signature: | Date: |

**(NOTE: A PARENT OF GUARDIAN MUST SIGN ON BEHALF OF ANY APPLICANT UNDER THE AGE OF 18 YEARS)**

## Full year membership (tick appropriate boxes)

TEERA will issue different coloured Membership Cards for Training, Novice and Endurance riders. If applying for Adult or Junior membership, tick the appropriate membership type below. If applying for Family membership, nominate the type of membership for each applicant. Make sure you send proof of rider status.

| Class of membership | Membership type | Membership Fee |
|---|---|---|
| ☐ Adult riding member (18 years old and over in 2010) | ☐ Training ☐ Novice ☐ Endurance | $190.00 |
| ☐ Junior riding member (under 18 years old in 2010) | ☐ Training ☐ Novice ☐ Endurance | $100.00 |
| ☐ Family riding members (2 adults & 2 children) | Training riders:<br>Novice riders:<br>Endurance riders: | $450.00 |
| ☐ Associate non-riding member (non voting) | | $50.00 |
| ☐ Non riding with voting rights | | $70 |

## Day riding membership

| | |
|---|---|
| ☐ Day riding member (covers a single short ride only) | $35.00 |
| Name of ride: | |

## Ride number:

| | |
|---|---|
| $30 to hire a ride number bib, refunded on return of bib.<br>You need to hire a bib if you plan to do an 80km+ ride in this membership year and do not already have a number.<br>Novice ride number bibs for 40km & 20km rides are provided on the day. | $30.00 |

**Notes:**
It is the responsibility of each member to make sure they renew their membership each year.
The membership year starts on 1st January.
All riders will be expected to show a current membership card at each ride they enter.
If you are not a current member you will not be covered by any TEERA or AERA insurance policies.
Only adult members have voting rights.

# AUSTRALIAN ENDURANCE RIDERS ASSOCIATION INC.
# MEMBERS DANGEROUS ACTIVITY ACKNOWLEDGEMENT

In consideration of the ……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 print)*..... (Membership No.): .....

*(Participant 2 print)* ..... (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 minimise 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, s/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 consequences of such medical condition or impairment;
**9.** to comply with AERA and the Associations 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 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 on behalf of my horse(s) as a result of the standstill.

**I have read and understood the above document** .

Signature of participant 1:…….. Date……..

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**: .....

**Name of guardian**: .....

**Guardian's signature** ……. Date …….