



# EA Coach Non-Member Release of Waiver of Liability

## Must be completed by any participant who is:

- **NOT a current member of Equestrian Australia OR**
- **NOT a current member of an affiliated club which is insured under the Equestrian Australia insurance program.**

I, the undersigned, in consideration for being permitted to participate in any way in horse sport activities and in particular lessons provided by an Equestrian Australia registered Coach, understand, acknowledge and accept that:

- Horse sports are a dangerous recreational activity and horses can act in a sudden and unpredictable way
- There is a significant risk that serious injury or death may result from horse riding and associated activities and freely assume all such risks; even if arising from the negligence of Equestrian Australia and/or the registered Coach or others
- I voluntarily participate at my own risk, and assume sole responsibility for any injury, death or property damage I may suffer
- I understand and acknowledge the dangers associated with and agree to not consume 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 will follow the directions of the Coach and understand that any misconduct or refusal by me to follow these directions can result in the cancellation of my participation 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 and I agree to indemnify Equestrian Australia and or the registered Coach or others 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 participating where this is required under the relevant EA and FEI rules and regulations and agree that I am solely responsible 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 Equestrian Australia and/or the registered Coach, their officers, officials, volunteers, 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 with any respect to and all injury, disability, death, or loss or damage to person or property, whether caused by the negligence of these parties or otherwise.

Name of Rider/ : \_\_\_\_\_  
Guardian (if under 18 years)

Address \_\_\_\_\_

Phone: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Occupation: \_\_\_\_\_

Emergency Contact Details: \_\_\_\_\_

## Riding experience (*tick where appropriate*)

Very experienced

Less than 50 hours riding experience

Less than 20 hours riding experience

Never ridden

Details of Riding Experience: \_\_\_\_\_

## 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 Equestrian Australia and/or the registered Coach and others, to the greatest extent allowed by law in the event of me and/or the children under my care, suffering injury or death.

Date ...../...../..... Signature of participant .....

## For participants of Minority Age (Under Age 18)

This is to certify that I, as a 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 Equestrian Australia and/or the registered Coach and others, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless these parties from any and all liabilities arising from my minor child's involvement or participation in horse sport activities, even if arising from the negligence of the above mention parties.

Date ...../...../..... Signature of participant .....