



Membership Application & Waiver

Open \$100

Including Senior

Junior/Youth \$50

18 years and under not running in Open

Family of 2 \$180

(2 x Open members)

Peewee \$20

10 years and under not running in Junior

Family of 4 \$260

(2 x Open Members)
(2 x Junior Members)

Supporter \$20

Non-rider

Member of another NBHA

Name:

DOB:

Name:

DOB:

Name:

DOB:

Name:

DOB:

PI.C:

Address:

Postcode:

Email:

Phone:

Emergency Contact Details:

Payment: Cheque / Cash at Event / District Account Direct Deposit

NBHA District:

National Barrel Horse Association of Australia Inc.

enquiries@nbha.com.au

Vice President: Kel Webb

Treasurer: Candice Burke

Secretary: Renee Myers

<p>Receipt No:</p> <p>(District Use only)</p> <p>Member No:</p> <p>District:</p> <p>(Office Use Only)</p>

Member Dangerous Activity Acknowledgement

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

Horse sports are a dangerous 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 understand and acknowledge the dangers associated with the consumption of alcohol or any mind altering drugs and 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 acknowledge that there are dangers inherent with horse sport activities including being thrown to the ground. I am assuming this and other hazards upon myself since I wish to ride.

I realise I am subject to injury from this activity and that no form of pre-planning can remove all dangers to which I am exposing myself.

If I have chosen to ride without a protective helmet, which could prevent permanent brain damage in the event of an accident, I have done so at my own risk.

I have had sufficient opportunity to read this Dangerous Activity Acknowledgement and fully understand its terms and sign it freely and voluntarily.

For Participants of Minority Age (Under Age 18)

I agree to wear an approved helmet at all times whilst participating on my horse under the NBHA rules and District Bylaws

I agree to abide by the NBHA Official Rules and the National Barrel Horse Association of Australia Inc. Bylaws (available on nbha.com.au) and understand, acknowledge and accept the notes above.

Signature of Rider: Date:.....

Signature of Rider: Date:.....

(All Riders over 18 years to sign above)

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.

Signature of

Parent/Guardian: Date:.....

(if member is Under 18 years)

The assets and income of the organisation shall be applied solely in furtherance of its abovementioned objects and no portion shall be distributed directly or indirectly to the members of the organisation except as bona fide compensation for services rendered or expenses incurred on behalf of the organisation.