



(Office Use Only) Client ID:

NATIONAL EQUESTRIAN CENTRE - K•E•R•R•A•B•E•E REGISTRATION FORM

Personal Details

Name: Date:

Address:

..... Postcode:

Telephone Numbers H)..... W)..... M).....

Age (if under 18yrs):..... D.O.B.:.....

Parents/Guardians if under 18 years:

Mother's Name:..... Phone:(H) (W).....

Father's Name:..... Phone(H) (W).....

EMAIL ADDRESS.....

How Did You find Out About Us: Friend Yellow Pages Web site

Other(Please Specify).....

MEDICAL INFORMATION

Are there any medical, physical, intellectual or social problems, which may affect your ability to ride or learn, about which the National Equestrian Centre should be made aware? (eg Asthma, Diabetes, Epilepsy, Allergies, Attention Deficit Syndrome or Behavioural difficulties etc). If so, please supply particulars:

ACKNOWLEDGEMENT AND ACCEPTANCE OF RISK

I agree that equestrian activities can be a dangerous. I hereby agree to the abovenamed attending the National Equestrian Centre and agree in attending the Centre that the proprietors, operators and their employees and agents including volunteers shall not be liable in any way for any injury (including death) , damage or loss to the abovenamed or persons accompanying them which may occur or happen from any cause whatsoever, including breach of contract, when attending the Centre. The abovenamed person whether participating in any of the activities of Kerrabee or not, agrees to attend Kerrabee only on this basis. The Parent/Guardian/Person by signing this form, agrees to indemnify the proprietors, operators and their employees and agents including volunteers against any claim or demand whatsoever made for or on behalf of the abovenamed person or any person accompanying them or in respect of any horse or property owned or used by them or by those accompanying them. By remaining at the Centre the abovenamed individuals agree they are accepting the above conditions.

WARNING Under the *Civil Law (Wrongs) Act 2002* , an equine professional is not liable for injury to, or the death of, a participant in an equine activity that results from an inherent risk of the activity. This is subject to the limitations set out in the Act.

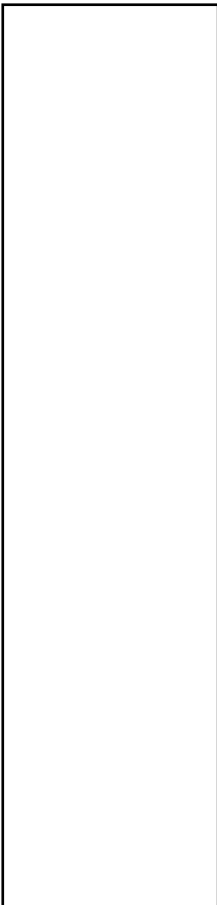
ROAD USE AGREEMENT

I agree to comply with the directions by the National Equestrian Centre to use the access road in accordance with the various ACT Road Rules and Regulations in place at the time and in addition **to not exceed the speed limit of 40 km/hr on Kerrabee** at any time. In addition I agree to specifically request any friends, suppliers or farriers or associates using the road such as for servicing my horses to similarly comply. I understand that if these road rules and speed limit are not followed by myself or associates that I may have my entry and usage rights to Kerrabee forfeited. In addition I agree to pay any penalties or fines which might be levied by NEQC as an alternative.

Signature: (Self/Parent/Guardian)

Witness: Date:

**NATIONAL
EQUESTRIAN
CENTRE**
K•E•R•R•A•B•E•E



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Weston Creek ACT 2611

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Fax: (02) 6287 4207

<http://www.neqc.com.au>
help@neqc.com.au

"Kerrabee Holdings Pty Ltd (ACN 100 682 139) trading as National Equestrian Centre"