

2010 MACQUARIE BANK ACT & SOUTHERN NSW HACK CHAMPIONSHIPS

Conducted by The ACT & SOUTHERN HIGHLANDS SHOW HORSE ASSOCIATION INC.

(ABN: 58 612 709 104)

ENTRY FORM – RIDING CLASSES

(One form per horse)

COMPETITOR: _____ PHONE: _____

(Copy of Birth Certificate must be supplied with this entry for riders under 21 years. Rider age is that at the first day of the event.)

ADDRESS: _____

I AM A FINANCIAL MEMBER OF: _____ HACK ASSOCIATION.

NAME OF MOUNT: _____ N.S.H. REGISTRATION NO: _____

(Copy of both sides of current Registration papers must be supplied with this entry and be in the name of Owner(s) identified below).

HORSE AGISTMENT ADDRESS: _____

	Class No	Entry Fee	Amount
RIDER CLASS	<input type="text"/>	\$25:00	<input type="text"/>

Entry in this Event shall constitute an agreement and affirmation from all participants (which include, without limitation, the Owner, Responsible Officer, Lessee, Manager, Agent, Rider, Handler and the Horse) for themselves that:

1. The information provided is complete and correct;
2. I /we have read the Show Horse Council of Australasia Inc. Competition Rules and the Regulations and Conditions of Entry applicable to this Show;
3. I/we shall compete subject to and agree to be bound by the Show Horse Council of Australasia Inc. Competition Rules and the Regulations and Conditions of Entry applicable to this Show;
4. By voluntarily participating in the Show, I/we shall accept as final any decision of the Show Horse Council of Australasia Inc. and/or the ACT & Southern Highlands Show Horse Association Inc. and/or the Macquarie Bank ACT & Southern NSW Hack Championships Committee and/or Officials of this Show in regard to any incident arising from or in connection with this Show;
5. I/we agree to indemnify the Show Horse Council of Australasia Inc. and/or the ACT & Southern Highlands Show Horse Assoc. Inc. and/or Officials of this Show, harmless for any action taken in relation to this event; and

**SIGNATURES BELOW AFFIRM YOU HAVE READ AND AGREE TO THE ABOVE REQUIREMENTS OF ENTRY.
MEMBERSHIP APPLIES TO ALL SIGNATORIES BELOW - REGULATION 15**

Name of Owner(s): _____

Signature(s): _____

(Name(s) are to be those shown on supplied Horse Registration Papers)

Name of Responsible Officer: _____

Signature: _____

Name of Competitor: _____

Signature: _____

Name of Parent/Guardian (if Rider under 18 yrs): _____

Signature of Parent/Guardian: _____

NOTE: ALL NAMES AND SIGNATURES MUST BE SUPPLIED IN EACH LOCATION ABOVE.