

SOUTH AUSTRALIAN ENDURANCE RIDERS ASSOCIATION INC.

LIABILITY WAIVER AGREEMENT

This agreement is compulsory and is entered into by:

(print full name).....Memb. No.....(nil if day member)

The agreement covers my participation in all endurance riding activities affiliated with or endorsed by SAERA

I understand that:

1. the ride organizers volunteers and SAERA 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 minimize risk of injury death or loss due to negligence or omission by the organizers and SAERA;
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. there are potentially significant risks and hazards involved with endurance riding and that horses are powerful and can be unpredictable and potentially dangerous animals;
4. it is compulsory to wear an approved safety helmet at all times whilst on or riding a horse, driving or navigating a harness vehicle at any event affiliated or endorsed by SAERA;
5. I am responsible for the control and welfare of my horse or any horse in my care or which I elect to ride or drive in harness and for ensuring that I am capable of managing such horse in the interests of my own safety and that of other participants, horses and property and I acknowledge that I have a duty of care towards other riders, participants, ride organizers, volunteers, landowners and their stock and/or property;
6. if I fail to comply with any reasonable instruction request or direction by ride organizers or other designated officials, upon my being so warned by the appointed Chief Steward, he /she 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 in the interests of my safety and wellbeing or that of other participants and horses and that this withdrawal is my decision and I will have no right to claim any expense or refund;

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, my horse, other participants and horses then upon notification from the Chief Steward I may be unable to participate or alternatively I take full responsibility for any consequences of such medical condition or impairment and that I have a responsibility to notify the ride organizers of any condition for which treatment may become necessary so that the appropriate action can be undertaken;
9. to comply with AERA and SAERA 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. on behalf of myself, my heirs, executors, administrators & assigns to waive and release & keep indemnified the AERA Inc. and SAERA Inc and the organizers and volunteers of any affiliated or endorsed event, landowners & their stock and/or property against any act or omission by them or by me which may result in any loss, injury, illness, death, expense or property damage to myself, my support team and my animals, other participants or horses at any endurance riding event.

SIGNED..... Date:
(Parent or guardian to sign where participant is under 18 years of age)

WITNESS..... Date:

(Original document to be retained by SAERA)