Liability Declaration Form

Pony Club Association of Queensland Inc. 30 June 2019 - 30 June 2020

Every Day Participant (Non-Member) Must Complete This Form

Please T	Please Tick The Appropriate Box:		
	I am a current member of an equine association, and/or I hold a current insurance policy, which pro Liability insurance to the minimum limit of \$10,000,000 per occurrence. The equine association I a and my membership / policy number is:	m a member of:	
	I understand that I will not be covered under the PCAQ Insurance Programme should a claim be ma	de against me.	
	I am not a member of any of the below and do not have a current Public Liability policy with a mini complete the Registered Participant Application. I am aware that this is not Personal Liability Insur cover travel to and from this show. I am also aware that no Personal Accident cover is provided.		
Please ti	Please tick if you are a member of:		
	Equestrian Australia (please note you must be a direct member of your state branch and not just an	Equestrian Australia (please note you must be a direct member of your state branch and not just an affiliated club).	
	Arabian Horse Society of Australia (please note you must be a financial member of the AHSA and no	Arabian Horse Society of Australia (please note you must be a financial member of the AHSA and not just an affiliated club).	
	Inter-State Pony Club		
	Other (please specify):	Other (please specify):	
	I hold my own personal liability policy for my equestrian activities. The insurance company is: and I attach my Certificate of Currency.	I hold my own personal liability policy for my equestrian activities. The insurance company is:	
organising entered or shall be d	n consideration of your accepting my participation, I hereby undertake to indemnify the organising body agains organising body by reason of any negligent act or omission on the part of any rider, driver, trainer or attendant ventered or any other horse owned or entered by me, and I agree that any act or omission on the part of such rides shall be deemed to have been negligent for the purpose of any claim under this indemnity. Further, I agree to a Club Association of Queensland and/or contained in any official show schedule and I also agree to abide by all or the purpose of any claim under this indemnity.	whilst he/she is attending, riding, driving or otherwise handling any horse so er, driver, handler or attendant found in any action against you to be negligent bide by the Rules & Conditions and current Rule Book as laid down by the Pony	
Print Nam	Print Name: Dated:		
Signed:	Signed: Contact Phone Number:		
For Parti	For Participants of Minority Age (Under Age 18)		
provided a	This is to certify that I, as a parent/guardian with legal responsibility for this participant, acknowledge, understorovided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to it from my minor child's involvement or participation in horse sport activities and in particular, this event, even if	ndemnify and hold harmless the Releasees from any and all liabilities arising	
Signed:	Signed: Contact Phone Number:		





