



## 20\_\_ Membership Application / Renewal

RENEWABLE EACH JANUARY, MEMBERSHIP RUNS FROM 1 JANUARY TO 31 DECEMBER

It is a condition of entry to the REA grounds that riders are financial members of the Redlynch Equestrian Association Inc. The Constitution of the Association states that membership will be terminated if membership fees are in arrears for a period of two months or more.

Name.....Occupation.....

Address.....Postcode.....

Phone: (H).....(W).....(Mobile).....Fax:.....

E-mail address (please write clearly):.....

Class of Membership (please tick)

All Memberships incur an additional \$300.00 Working Bee Levy payable in a 2 part payment Part 1 \$150 due 1st January and Part 2 \$150 due 1st July. Part 2 only payable if 6 hours maintenance duties not completed in first 6 months

of the year ie by 30th June. To have your Working Bee Levy refunded you must contribute a minimum of 6 hours maintenance duties at the REA grounds. Members will be deemed unfinancial on failure pay 2nd maintenance fee if 6 hours maintenance duties have not been completed in the first 6 months of the year. : Join the mowing roster, help out at working bees, events, training day, or do some of the listed odd jobs in your own time.

- Single Membership for Individuals over 18 yo **\$75.00 pa MF + \$150 Part 1 WB Levy = \$225.00**
- Single Membership (After 1st July) **\$37.50 + \$150 WB Levy = \$ 187.50**
- Family Membership (inc all family living at the same address) **\$150.00 pa MF + \$150 Part 1 WB Levy = \$300**
- Family Membership (After 1st July) **\$75.00 + \$150 WB Levy = \$225.00**
- Non Riding Social Membership **= \$ 15.00pa**

Do you require a Toilet Facilities Key @ \$6.00

YES NO

**TOTAL FEES PAID = .....**

CHEQUE ENCLOSED or

DIRECT DEPOSIT DATE \_\_\_/\_\_\_/20\_\_\_ and Receipt No: \_\_\_\_\_

Postal Address:		Direct Deposit Details
The Secretary	Cheque or DD only REA Bank Account	Bendigo Bank BSB No: 633108
Redlynch Equestrian Association	NO CASH	Account No: 1142 84037
Po Box 194		
REDLYNCH QLD 4870		

### Note to New Members:

On receipt of: 1) Your completed, REA Membership Application

2) Payment of REA annual Membership Fees & 6 month Working Bee Levy Part 1 (as above)

The REA Induction Officer will then contact you, to arrange an induction of the REA, before you are permitted to ride or use the REA facilities.

**PLEASE LIST ALL FAMILY MEMBERS' DETAILS (INCLUDING RIDERS AND NON-RIDERS)**

NAME	AGE	RIDING LEVEL (1,2 OR 3)	Description of Riding Level
			<b>1=</b> Infrequent rider = from a person who has never ridden a horse, up to a person who can mount a horse, dismount a horse and stop a horse. May be confident at riding the horse at a walk.  <b>2 =</b> Medium Rider = competent at riding the horse at both walk and trot.  <b>3 =</b> Competent rider = confident at riding at a walk, trot and canter.

DETAILS OF ANY MEDICAL CONDITIONS: .....

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.....

EMERGENCY CONTACT PERSON: .....

EMERGENCY PHONE NUMBER: .....

**Privacy Statement (Privacy Act 1998)**

Personal information supplied through the completion of this form, is needed to ensure your safety during your time at the REP. The REA is required to collect this information by our insurance company and The Equestrian Federation of Australia. The information provided will not be supplied to any other organisation or used for any other purpose than that for which it is required.

**Please tick the horse activities that you are interested in to help us tailor events to members' interests.**

- Cross Country   
  Dressage   
  Fun/Rally Days   
  Showing/Hacking/Breeds  
 Social   
  Horsemanship   
  Endurance   
  Showjumping  
 Other (Specify) .....

**I can offer the following non-equestrian skills:**

- Writing   
  Telephoning helpers   
  Photography   
  First aid (human and/or horse)  
 Handyman/woman   
  Computing   
  Shopping   
  Other (please Specify): \_\_\_\_\_

**I can offer the following equestrian skills:**

- Dressage Judge   
  Showjumping Judge   
  Hacking Judge   
  Instructor  
 Course Designer   
 Other (please Specify): \_\_\_\_\_



I, the person applying for membership have read and understand the REA Code of Conduct (<http://www.redlynchequestrian.com/Forms/CodeOfConduct.pdf>) and the terms and conditions attached to this membership and agree to abide by them. I acknowledge that the REA relies on the information provided by me and I state that all the information is accurate and complete.

SIGNED \_\_\_\_\_ (MEMBER) \_\_\_\_\_ (DATE)

(Member)

I, a representative of the REA Committee acknowledge the terms and conditions attached to this Membership.

SIGNED \_\_\_\_\_ (for the REA) \_\_\_\_\_ (DATE)

(REA Committee Member)

### Disclaimer

I, \_\_\_\_\_ hereby acknowledge that I use the REP at my own risk and that I am aware that activities involving horses can be hazardous and that the servants, agents, representatives or volunteers accept no responsibility or liability for any injury or loss that I or my horse might sustain as a direct or indirect consequence of using the REP whether such injury is a consequence of any act or omission by the servants, agents, representatives or volunteers, except in regard to any rights they may have arising under the Trade Practices Act 1974.

I agree that I will obey and will comply with all rules and/or directions made or given by the REA in connection with the use of the REP. In particular I acknowledge that I must wear an approved helmet at all times whilst riding and appropriate footwear when handling and/or riding my horse.

I agree to indemnify the REA against all claims made by any other person against the REA in respect of any injury, loss or damage suffered by myself, my horse or by any person or their horse arising from or in connection with the my riding activities, whether such injury, loss or damage was caused directly or indirectly by any action of the REA.

I hereby release the REA from all such claims, and indemnify the REA against all claims made by or on behalf of any other person.

I acknowledge that I must report all accidents, injuries, loss or damage to the REA when I become aware of them.

If I suffer any injury or illness whilst at the REP, I agree that the REA may provide evacuation, first aid and medical treatment at my expense, and my acceptance of these terms and conditions constitutes my consent to such evacuation, first aid/or medical treatment.

**In the case of children under the age of 18 years this notice provides an indemnity, the terms of which are.**

I, \_\_\_\_\_ being the parent/guardian of the rider/non-rider, hereby agree that by signing this notice I will keep REA fully indemnified against any and all claims of what so ever kind or nature that my child might make against REA, as a consequence of any injury or loss sustained through any of the equestrian/agistment activities or in respect of any claims that may be made against REA as a result of an act or omission of the rider/nonrider generally acknowledge and accept all terms and conditions of the disclaimer set out above.

I also acknowledge that being the parent/guardian of the rider/non-rider under 18 years of age I am responsible for providing supervision at all times.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_