



DAY MEMBERSHIP APPLICATION

2020

Please indicate Membership type X

Open Membership \$15 Junior Membership \$15 5 to 10 Yrs Membership \$10

**Please note no Day Membership is available for Under 5 years riders
(Under 5 years are free membership, please complete a yearly form)**

Member Details:

Name: _____ Male Female
Address: _____ Suburb _____
State: _____ Post Code: _____ Mobile _____
Date of Birth: _____ Email: _____

In making application for membership in the Queensland Barrel Racing Association, I hereby agree to abide by all of its rules and regulations and I understand that before competing in QBRA that I must read and sign the Liability Waiver Form

CODE OF CONDUCT OF THE QUEENSLAND BARREL RACING ASSOCIATION

By signing this Code of Conduct as a member of the QBRA, I am agreeing to abide by the rules and conditions of the QBRA and agree to the following.

Section 12:29 - Conduct that is not in the best interest of the QBRA or its members may result in forfeit of membership rights at the discretion of the QBRA Board. This includes any direct or indirect derogatory comments about QBRA including its members, promoters & sponsors, especially on public forums such as social media.

This includes any direct or indirect derogatory comments about the QBRA including its members, promoters & sponsors, including public forums and all social media. This also includes a sponsor's product or donation to the QBRA.

No competitor shall conduct himself/herself in any manner which, in the opinion of the QBRA Board and Committee, brings ill repute upon the Association or its members.

This includes but is not limited to:

- Either verbal or physical attacks/abuse of another person
- Engaging in any form of behaviour that is unbecoming of a member and is not respectful of others
- Harassment of any group or individual
- Uttering obscenities, ridicule or baiting of others

Members/Guardian Signature _____ Date: _____

Please select one of the following payment options:

I have enclosed a cheque / money order for \$_____ made payable to QBRA

I have paid cash \$_____ at Event/Show (only membership payment please)

PLEASE NOTE: PAYMENTS MADE AS A DAY MEMBER WILL NOT BE TAKEN OFF YEARLY MEMBERSHIP FEE.



RISK WARNING SIGN
Exclusion of Right to Sue
These Conditions Affect Your Legal Right.



PLEASE READ CAREFULLY

Queensland Barrel Racing Association

their employees and agents shall have no liability howsoever caused to YOU or any dependant for personal injury or death suffered by YOU or any dependant arising in any way whatsoever from the supply by

Queensland Barrel Racing Association

of recreational services, including but not limited to
 Horse riding, arena instruction, horse training & clinics

YOU acknowledge that Recreational Services are dangerous activities with many inherent risks as a result of which personal injury (and sometimes death) are common. YOU by your participation accept all risks of personal injury or death in any way whatsoever arising from your participation in such recreational activities and YOU and any dependants release and forever discharge

Queensland Barrel Racing Association

and its employees and agents from all and any liability and claims arising from the supply of the Recreational Services.

ARM RWSG 07 2012

LIABILITY WAIVER FORM
EXCLUSION OF CERTAIN RIGHTS TO SUE

The purpose of this agreement is to limit the liability of the Provider to exclude liability for any personal injury or death to the Participant and other people in the care and control of the Participant howsoever caused who signed this form as acknowledgment of the terms and conditions of this agreement. By signing this form you are waiving your rights to sue the Provider for losses relating to personal injury or death. Under the provisions of the Trade Practices Act and Various State Laws conditions are implied into contracts that mean that the Provider of Recreational Services, noted below, is required to ensure that the Recreational Services it sells to you are: rendered with due care and skill, are fit for the purpose for which they are commonly bought as it is reasonable to expect in the circumstances or might reasonably be expected to achieve the result you have made known to the Provider.

NAME OF PROVIDER: QUEENSLAND BARREL RACING ASSOCIATION

The Participant acknowledges that the activity being undertaken is an activity being undertaken for the purposes of recreation, enjoyment or leisure which involves a significant degree of physical risk. The Provider acknowledges that they are providing Recreational Services detailed below which means; providing facilities for participation in a recreational activity, or training a person to participate in a recreational activity, or supervising, adjudicating, guiding or otherwise assisting a person's participation in a recreational activity.

The Participant hereby acknowledges that in attending the recreational activity that there are inherent risks involved to him or her or other people in their care and control. This agreement is directed and limited to inherent risks that are patent. The participants also acknowledge that the purpose of the recreational activity is for the benefit of the Participant and for the benefit of those people attending with the Participant and that at all times the Participant is responsible for his or her own actions and the actions of those other people in his or her care and control.

Description of Recreational Services: Horse Riding, arena instruction, horse training & clinics

Steps taken to avoid the danger of personal injury or death: emergency procedures in place, contingency plans in place for emergencies, at least one qualified first aid person on staff, communication procedures in place, inspections of arena and surrounds for safety.

The Participant acknowledges that during all times while he or she is attending the recreational activity he or she does so at his or her own risk and that the Participant and other people in the care and control of the Participant will not hold the Provider or any of its employees or agents liable for any personal injury or breach of contract whether caused by the negligence of the Provider its employees or agents howsoever caused or otherwise. The Participant acknowledges that in the event that he or she or any of the other people in their care and

control find either or any of them is in difficulty that they are to stop the activity or request that the activity be stopped if appropriate, and seek help and/or assistance and advice.

Declaration and signature

By signing this agreement, I understand that the Recreational Services about to be sold to me as set out in this form may cause my and or my dependants personal injury or death. By signing this agreement, I understand that I and my dependants waive our rights to sue the Provider for losses relating to my and or my dependant's personal injury or death that result from any negligence caused by the Provider.

Signature of Participant:

Date:

Print Name:

Address:

Signature of Legal Guardian (if participant is U/18)

Post Code:

State: QLD