



DAY MEMBERSHIP

APPLICATION 2024

Please indicate Membership type

Open /Junior Membership \$20 Joint Open & Jnr Membership \$25 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 declare I have read and agree to abide by all of its rules and regulations, and I understand that before competing in QBRA, I must sign this form stating I agree to the Code of Conduct which is on this form. I understand that I must also 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 and Waiver of Liability

Queensland Barrel Racing Association	
State: QLD	Postcode:
Name of Participant	Postcode:
Address of Participant	State:

The following pages affect your legal rights and obligations. Please read these carefully and only sign if you fully understand their contents. For Participants under 18 years of age, these documents must be completed by a parent or legal guardian.

Description of Activities*:

Risk Warning

Barrel Racing Competition and Training Days

I am aware that by my participation in any activities arranged by the Provider, certain risks or dangers may occur which could include:

- Physical, bodily or psychological injury or death.
- Physical exertion to which I am not accustomed.
- Failure of equipment or use of inadequate equipment.
- There may be no or inadequate facilities for treatment or transport to treatment if I am injured.
- The conditions in which the activities are conducted may vary without warning.
- I may cause injury to other persons and/or other persons may cause injury to me.
- I may be injured or die due to the negligence, breach of contract or breach of statutory duty or guarantee of the provider.

I acknowledge that the activities are being undertaken for the purposes of recreation, enjoyment or leisure, and involve a significant degree of risk of physical harm.

I acknowledge that the Activity may be undertaken with one or more other persons as part of a group and that the Provider is not liable for the actions of other participants in the group activity.

By signing below, I acknowledge, agree and understand that the risks associated with the Activities and/or recreational services have been explained to me. I undertake any such risk voluntarily and at my own risk.

I acknowledge that the risk warning above constitutes a "risk warning" in accordance with the *Civil Liability Act 2002* (NSW) and the

Civil Liability Act 2002 (WA).

Participant's Warranties

I agree to abide by any of the Provider's rules, and any direction or instruction given to me by the Provider during the course of the Activities. I agree to use and/or wear any equipment given to me by the Provider.

I declare that I am medically and physically fit and able to participate in the Activities. I acknowledge that I must, and agree that I will, disclose any pre-existing medical or other condition, injury or concern that may affect the risk that either I or any other person will suffer injury, loss or damage during the course of the Activities and notify the Provider of any injuries, illness or concerns that may arise during the Activity. I will not engage in any reckless, negligent or foolish behaviour or any other behaviour that is likely to cause injury to me, any other participant or person.

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

I declare that I have not consumed any alcohol or mind altering substance, or medication that may impact my judgement or physical capacity, before or at the time of engaging in the Activities.

Exclusion of liability

I agree to and unconditionally release, waive, discharge and forever hold harmless, the Provider or any of its employees, agents, directors or officers, from any claims as a result of any personal injury sustained, whether caused by the Provider's negligent act or willful act or omission, breach of contract, breach of statutory duty, error, or otherwise in connection with or arising out of the Activities. I agree that the Provider will not be liable for any claims for personal injury that may be brought against it as a result of or in connection with any act, omission, default, failure or error on the part of the Provider, and agree to indemnify and keep indemnified the Provider in respect of any such claims.

1 Provider includes the officers, employees, agents, contractors, franchisees and assigns of the Provider.

2 Activities includes all activities and services ancillary to or associated with the named Activity, both before and after the Activity, including transportation to and from the location of the Activity whether provided by the Provider or not, briefings, inductions, training, and the provision of information in all manuals, safety guidelines and other documentation provided to or made available to the Participant with respect to the Activity, familiarisation with clothing or equipment and methods of operation of equipment and the wearing and removal of any clothing or equipment associated with the Activity. Unless otherwise specified, a reference to an Activity is a reference to a recreational service or a recreational activity as defined in relevant legislation referred to herein

Waiver

It is possible for a supplier of recreational services to ask you to agree that the statutory guarantees under the *Australian Consumer Law* (which is schedule 2 to the *Competition and Consumer Act 2010* (Cth)) do not apply to you. If you sign this form, you will be agreeing that your rights (or the rights of a person for whom or on whose behalf you are acquiring the services) to sue the Provider in relation to the Provider's services or the activities that you undertake because the services or activities provided were not in accordance with the guarantees are excluded, restricted or modified as set out below.

For Queensland, New South Wales, Western Australia, Tasmania, Northern Territory and Australian Capital Territory and Commonwealth

By signing this form, you agree that the liability of the Provider in relation to the activities (as defined by the *Competition and Consumer Act 2010* (Cth), the *Consumer Affairs and Fair Trading Act* (NT) and the *Australian Consumer Law*) and recreational activities (as defined by the *Civil Liability Act 2002* (NSW) and the *Civil Liability Act 2002* (WA)) for any:

- (a) Deaths;
- (b) Physical or mental injuries (including the aggravation, acceleration or recurrence of such an injury);
- (c) The contraction, aggravation or acceleration of a disease;
- (d) The coming into existence, the aggravation, acceleration or recurrence of any other condition, circumstance, occurrence, activity, form of behaviour, course of conduct or state of affairs in relation to an individual;

(i) That is or may be harmful or disadvantageous to you or the community; or

(ii) That may result in harm or disadvantage to you or community;

That may be suffered by you (or a person for whom or on whose behalf you are acquiring the services) resulting from the supply of the recreational services or recreational activities is excluded.

You acknowledge and agree that the above provision operates to exclude the liability of the Provider as a result of a breach of an express or implied warranty that the recreational services will be rendered with reasonable care and skill in accordance with section 5J of the *Civil Liability Act 2002* (WA) and section 5N of the *Civil Liability Act 2002* (NSW).

Declaration and Signature

I have read carefully and understand this risk warning and waiver of liability and sign it freely and voluntarily without inducement of any kind.

Signature of Participant: _____ Date: _____

Signature of Witness _____ Date: _____

For Participants under age 18

This is to certify that I, as a parent/guardian with legal responsibility for the Participant, acknowledge, understand and accept all of the above and consent to his/her release as provided above. I release and agree to indemnify and hold harmless the Provider from any and all liabilities arising from my minor child's involvement or participation in the Activities and/or recreational services, even if arising from the negligence of the Provider.

Signature of Legal

Guardian: _____ Date: _____

Name (Print): _____ Date: _____

Signature of Witness _____ Date: _____