## **EV MASTERS GAMES - NCDV HARNESS SHOW - 30 YRS+**

SUNDAY 29<sup>TH</sup> APRIL, 2018

Werribee Park National Equestrian Centre, 170 K Road, Werribee South

## **ENTRY CHECKLIST**

(Please attach to entry)

Please tick	Entry may not be accepted if one or more of these items is not provided				
	ENTRY FORM				
	DISCLAIMER SIGNED				
	HORSE DECLARATION - BIOSECURITY FORM				
PAYMENT TYPE: (please circle)	CHEQUE	MONEY ORDER			
	NETBANK	ON DAY ENTRIES (CASH)			
	PROOF OF PAYMENT ATTACHED (For internet banking only)				
	MEMBERSHIP FORM (if not currently financial)				
	WAIVER SIGNED				

## **EV MASTERS GAMES - NCDV HARNESS SHOW - 30 YRS+**

**SUNDAY 29<sup>TH</sup> APRIL, 2018** 

Werribee Park National Equestrian Centre, 170 K Road, Werribee South

PRE ENTRY FEE: \$10 per classEntries close: Postmarked Wednesday 20th April 2018

Email:

	<b>ENTRIES</b> : \$12 per class Entries rece	eived after closing date, in	cluding entries on	tne day	T	
Class #	Driver Name (please include DOB for driver classes)	EA/NCDV No.	Н	orse Name	Fee	
CDV	Membership fee as per tick box on m	embership form (\$60/	<b>\$30</b> ):			
ompı	ulsory WPNEC Facility fee	No. horses	.@ \$16 per hors	se/per day		
				Total	\$	
lease : ank re	es payable to: <b>National Carriage Drivir</b> send entries to: <b>NCDV PO Box 1114 Kyne</b> <i>Entries may be po</i> emittance by direct deposit to: <b>N.C.D.V.Incl</b> ware of and agree to pay any excess that app	ton 3444Email: nc isted or emailed with payn Bendigo Bank BSB: 63:	dv.inc@gmail.com nent or proof of pa 3 000 Account N	m yment included lo.: 146 326 285		
		,	,	, <b>3</b> k k		
Signed:				Date:		
ny acc	petitors and their grooms and passengers co cident, theft, illness or damage to horses, driv by this regulation. I am aware of and agree to event.	ers, grooms or any person	n whatsoever. All	competitors, by enter	ing this event, agree to	
			Mobile:			
Competitors Name:			(so contact can be made on the day if required)			
\ddre	566.					

## **EV MASTERS GAMES - NCDV HARNESS SHOW - 30 YRS+**

SUNDAY 29<sup>TH</sup> APRIL, 2018

Werribee Park National Equestrian Centre, 170 K Road, Werribee South

#### NCDVHorse Event Participation Declaration – Biosecurity Form

This form MUST be filled out and accompany your entry form

**Details of Owner/Person in charge of horse/s:** 

Name:	er/Person in charge		Phone No:				
Address:							
Full name of horse/s:		Identification (colour/markings/brand, etc.) Horse rego papers will be accepted as ID.		Microchip or Registration Number:			
1.							
2.							
3.							
4.							
				1			
Address of prope	Address of property from which the horse/s has/have been moved PRIOR to this event:						
PIC No.							
Address of properties  Horse 1.	erty/s to which the ho	orse/s will move AFTER this event	:	PIC:			
Horse 2.				PIC:			
Horse 3.				PIC:			
Horse 4.				PIC:			
110136 4.				110.			
Are any of these	properties consider	ed to be located in a Hendra 'hotsp	oot' (please circle)?	YES	NO		
Health of Horse		·	,				
I.		declare that the horse/s	s named above has/	have been ir	n good health		
eating normally a		ns of any disease during the last 3					
** I give my authorisation for the designated Event Horse Official to call for a veterinary inspection of the horse/s named above, and in my care, should they be showing signs of any illness at any time during the course of this event. I agree to pay any veterinary fees incurred as a result of this, and any ensuing veterinary examination. In addition, I agree to be responsible for any costs incurred by me, or my horse/s in the event of a lockdown.							
**If my horse/s does/do not remain healthy between event entry closing date and the event itself, I agree not to attend.							
Signed:			Date:				

# NATIONAL CARRIAGE DRIVING VICTORIA Inc.

#### Membership application form

1 July 2017 to 30 June 2018

Full name:		NCDV m'ship number:			
Residential Address:					
Suburb:	Postcode:				
Telephone number:	Mobile num	ber:			
Email:					
Postal address (if different from	above):				
Suburb:	Postcode:				
Membership types and fee:	tor Junior	Social	EA member		
\$60		\$30 -competitors and	\$30.00  Membership must be		
For those who wis drive or groom	sh to Under 18yrs	olunteers/	financial and type and number provided below:		
	D.O.B / /				
Payment Details (please complete either  Total amount paid: \$	Cheque or direct deposit details	<u>s)</u>			
Cheque number:	•	rect deposit receipt number: ease use your name as reference)			
	Proof of payment must also be s				
Cheque or Bank Deposit to Na	ational Carriage Driving Victoria	Inc: BSB 633 -	000 Acc 146326285		
Emergency contact					
Current Ambulance cover? YES/NO	) If yes, subscription no	umber:			
Two additional contacts in case of an em	nergency:				
Name 1:	Number:				
Name 2:	Number:				
Medical Declaration: (optional and strictly co	nfidential)				

## Member Release and Waiver of Liability-this must be included with your membership

In consideration for being permitted to participate in any way in horse sport activities, I, the undersigned, understand, acknowledge and accept that:

Horse sports are a dangerous recreational activity and horses can act in a sudden and unpredictable (changeable) way, especially if frightened or hurt.

There is a significant risk that serious INJURY or DEATH may result from horse sport activities.

I knowingly and freely assume all such risks, both known and unknown, and I voluntarily PARTICIPATE at my OWN RISK and assume sole responsibility for any injury, death or property damage I may suffer that arises from my participation in horse sport activities.

I understand and acknowledge the dangers associated with the consumption of alcohol or any mind altering drugs before and during the activities and I take full responsibility for any injury, loss or damage associated with their consumption. I agree not to drink alcohol or take drugs prohibited by law before or during any horse sports activities.

I agree to follow the directions of any event organiser or official and that any misconduct or refusal by me to follow any direction of any organiser or official can result in the **CANCELLATION** of my participation in the activities and my immediate removal from my horse **NO MATTER** where that may occur. I understand that any such non-compliance may result in injury, death and/or permanent disability as a result of my failure to comply.

I agree to wear a helmet at all times whilst riding where this is required under the relevant EA and FEI rules and regulations and agree that I am solely responsible for ensuring that whilst riding I wear a suitable helmet at all times where required under the relevant EA and FEI rules and regulations and take sole responsibility for my actions.

I have had sufficient opportunity to read this assumption of risk agreement, fully understand its terms and sign it freely and voluntarily.

Signature of applicant:	Date:	/	/	
For Participants of Minority Age (Under Age 18):				
This is to certify that I, as a parent/guardian with lega	l responsibility for this particip	ant, acknowled	lge, understand	
and accept ALL OF THE ABOVE and consent and agree	e to my minor child's involveme	ent or participa	ition in horse	
sport activities.				
Full name of responsible Guardian/Parent:				
Tun name of responsible Guardian, raient.				
Signature of applicant:	Date:	/	/	

National Carriage Driving Victoria Inc

P.O. Box 1114 Kyneton VIC 3444

Email: ncdv·inc@gmail·com
Enquiries: Jodie Mckeone – 0408 587 333