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MEDIA RELEASE OF LIABILITY

Name of Media Photographer:		
Address		
Suburb	State	Post Code
As a condition of being permitted to enter and pevents, I HEREBY WAIVE any rights I might have any and all claims for loss or damage arising from or arising from my attendance, or that of any perdirection or control, at any events conducted or Victoria, whether arising from or caused or contacts or omissions of any person participating in to of that event, whether as an officer, employee or official, helper, volunteer or participant, or the suparticipating as a spectator and further HEREBY AND AGREE TO HOLD HARMLESS and INDER participating in the organisation, administration of which I might hereafter have in relation to any sumight be suffered or arising as described above.	e or might here in injury, death rson employed organized by ributed to in a he organisation otherwise of upporter of a p RELEASE AND MNIFY Equesti or conduct of t	eafter acquire in relation to or property damage suffered by me or acting under my or on behalf of Equestrian my way by the negligence or n, administration or conduct Equestrian Victoria, or as an participant or any person D FOREVER DISHARGE rian Victoria and any person that event, from any claim
I agree to assume all risks associated with photoguse of the facilities and any other activities associated the events and that of any person employed by	iated with my	assignment and/or presence
If any portion of this agreement is deemed unenf force and effect. I intend to RELEASE to be inter		
Signature of Applicant		_ Dated: / /
Please Note: All persons attending an Event as page a Release of Liability form.	art of a media	team, must complete and sig