



# WANNEROO Agricultural Society (INC.)

ABN: 44 628 373 069

PO Box 4, Wanneroo, 6946  
Phone: 0499 992 464

**PRESIDENT:** Mr. Michael Aspinall 0417 909 433  
**SECRETARY:** Mrs. Jan Hacon 0412 742 574

Email: [Info@wannerooshow.com](mailto:Info@wannerooshow.com)  
Website: [www.wannerooshow.com](http://www.wannerooshow.com)

## HORSE EVENTS ENTRY FORM ONE ENTRY FORM PER COMPETITOR

**Entry forms with payment close 5pm Friday the 22<sup>nd</sup> November 2019.**

Separate entry forms and disclaimer must be signed by every horse and rider combination. Please refer to Wanneroo Agricultural Society General Terms in conjunction with Horses Section A and Society By Laws and Regulations which form part of this entry.

COMPETITORS NAME: \_\_\_\_\_ DOB: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
SUBURB: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
HOME PHONE \_\_\_\_\_ MOBILE: \_\_\_\_\_  
HORSES NAME: \_\_\_\_\_  
EWA RIDER NUMBER: \_\_\_\_\_ PONY CLUB WA \_\_\_\_\_

Please list the classes in which you wish to nominate:		<b>PAYMENT VIA CHEQUE / CASH / DIRECT DEPOSIT (PLEASE CIRCLE)</b>  <b>DIRECT DEPOSIT DETAILS</b> Wanneroo Agricultural Society Inc Bendigo Bank BSB: 633 000 Account: 151 740 917
Class #	Description	

ENTRY FEE PER CLASSES 1: \$10	\$
ENTRY FEE PER CLASSES 2, 3, 4: \$15	\$
ENTRY FEE FOR CLASSES 5, 6: \$20	\$
EA LEVY \$4.00 PER ROUND MAX \$24.00	\$
Late Fee after 22 <sup>nd</sup> November: \$10	\$
<b>TOTAL</b>	\$

Please quote surname as reference

**MAIL ENTRIES TO: P.O. BOX 4.  
WANNEROO 6946**

**OR DELIVER DIRECT TO OUR  
SOCIETY OFFICE MAILBOX: 11B  
LEACH ROAD WANNEROO**

CONTACT WANDA LONGLEY for information on 0409 888 060  
CONTACT JUANITA BREWER for information on 0417 187 914

I certify that the above particulars are correct, and I agree to conform to and accept the By-Laws and regulations and make these entries subject to the ordinary rules and regulations and By laws of the society, and I hereby hold the society free from liability in connection with any mistakes or errors that may be made in these entries or in the Schedule of Prizes. I understand the society may use my photograph and name in publicity and marketing material and may use my email to send promotional material from time to time. The complete version of the Wanneroo Agricultural Society privacy policy is available from our website [www.wannerooshow.com/privacy](http://www.wannerooshow.com/privacy)  
**Day insurance cover is available for riders on entries made prior to 22<sup>nd</sup> November through AON insurance (fees apply)**

PRINT NAME HERE \_\_\_\_\_

SIGN HERE \_\_\_\_\_ DATE \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE REQUIRED IF HANDLER UNDER 18YEARS





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Wanneroo Agricultural Society Inc.

## WANNEROO AGRICULTURAL SHOW - HORSES SECTION A

### DISCLAIMER STATEMENT

NOTE: A SEPARATE DISCLAIMER STATEMENT IS REQUIRED FOR EACH PERSON.

Exhibitor Name: \_\_\_\_\_ Exhibit Name: \_\_\_\_\_

### ALL ADULT EXHIBITORS, RIDERS, GROOMS, ATTENDANTS and ANY OTHER PARTICIPANTS 18 YEARS OF AGE and OVER

I acknowledge and agree as a condition of participating at the 2015 Wanneroo Agricultural Show that neither The Wanneroo Agricultural Society Inc., its directors, officers, employees, members and agents, participants, officials, volunteers, medical personnel, any persons, promoters, sponsors, providers of equipment, advertisers, nor Owners or Lessees of premises used to conduct the EVENT(S) shall be under any liability whatsoever for either the death of or for any injury, loss or damage which may be sustained or any claim, demand or costs arising therefrom and incurred by myself or any rider, driver, passenger, attendant or any other participant for whom I am responsible, as a result of participation in or being present at the EVENT(S).

**I acknowledge that equestrian activities are dangerous and that accidents causing death, injury, disability and property damage, can, and do occur.**

By signing hereunder I confirm I have read and understood the contents of this Disclaimer together with the Society's Section Conditions by which I agree to abide.

Name (Print): \_\_\_\_\_ Signature: \_\_\_\_\_

Dated this: \_\_\_\_\_ day of \_\_\_\_\_ 2019

### PARENT/LEGAL GUARDIAN CONSENT for EXHIBITORS, RIDERS, GROOMS, ATTENDANTS and ANY OTHER PARTICIPANTS 17 YEARS OF AGE and UNDER

I, \_\_\_\_\_, being the parent/legal guardian of Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ confirm that I have read the whole of this document and have taken all necessary actions to ensure I am aware of the activity in which the above named will participate at the 2015 Wanneroo Show and consent to him/her participating. **In doing so, I acknowledge that equestrian activities are dangerous and that accidents causing death, injury, disability and property damage can and do occur.** I acknowledge and agree that neither The Wanneroo Agricultural Society, its directors, officers, employees, members and agents, participants, officials, volunteers, medical personnel, any persons, promoters, sponsors, providers of equipment, advertisers nor Owners or Lessees of premises used to conduct the EVENT(S) shall be under any liability whatsoever for either the death of or for any injury, loss or damage which may be sustained or any claim, demand or costs arising therefrom and incurred by the abovenamed or by any other person for whom I am responsible as a result of participation in or being present at the EVENT(S).

By signing hereunder I confirm I have read and understood the contents of this Disclaimer together with the Society's Section Conditions by which I agree to abide.

Name (Print): \_\_\_\_\_ Signature: \_\_\_\_\_

Dated this: \_\_\_\_\_ day of \_\_\_\_\_ 2019



WANNEROO  
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**MOVEMENT OF ANIMAL DISCLAIMER STATEMENT**

Name of person in charge of horse(s): .....

Contact Phone: .....

Address: .....

.....

Name of horse: .....

Identification (colour/markings/brand): .....

.....

Address of property from which the horse moved to the event:

.....

Address of property to which the horse will move after the event: *(If different from above.)*

.....

.....

**Health of Horse**

I,..... declare that the horse named above has been in good health, eating normally and not shown signs of respiratory disease during the last 3 days leading up to this event. I give my authorisation for the designated Event Horse Health Official to call for veterinary inspection of the horse named above and in my care should they be showing signs of infectious illness or condition at any time during the course of the event. I agree to pay any veterinary fees incurred as a result of this veterinary examination.

**Signed:** ..... **Date:** .....

**Cleaning and Disinfecting of Horse Gear**

I, ..... declare that equipment (tack, bridles, brushes, buckets and other articles that have come into contact with equines) and the horse transport vehicle have been cleaned and disinfected before leaving the property to travel to this event.

**Signed:** ..... **Date:** .....