



CLAREMONT THERAPEUTIC RIDING CENTRE (Inc.)

A registered charity

CAMP ENROLMENT FORM

PO Box 13
Claremont 6010
Phone/Fax: 9384 3492
Email: ctrc@bigpond.net.au

1. Details

Riders Name: _____ Date of Birth: _____

Address: _____ Post Code: _____

Contact Ph: _____ Mobile: _____

Email: _____

Name of parent or contact: _____

PHONE NO. IN CASE OF EMERGENCY : _____

Any Medical Conditions: _____

2. Days Attending - Please Circle

April 11 th	April 12 th	April 13 th
April 18 th	April 19 th	April 20 th
July 4 th	July 5 th	July 6 th
July 11 th	July 12 th	July 13 th
October 3 rd	October 4 th	October 5 th
December 19 th	December 20 th	December 21 st

** Camp dates subject to change*

Number of days _____ @ \$100 per day (subject to change) Total= _____

This fee is non-refundable once booking is made.

**Direct Deposits can be made to ANZ bank; BSB 016281 Acc No. 340821331 please place client name in ID and "camp".
CTRC also accepts cheque or cash payments prior to commencement of camp**

This form must be completed and returned before participation in any activity organized by Claremont Therapeutic Riding Centre (CTRC)

I agree / give permission for the participant to be involved in CTRC activities.

I understand that no liability can be accepted by the Center concerned in the event of an injury or accident occurring. All due care will be taken at all times.

I also consent for the above mentioned participant to be allowed emergency medical attention, if necessary, during participation in any activity.

I agree that any photograph taken of the above named participant during a CTRC activity may be used to further the aims of the Center.

In some circumstances the Head Coach needs further information about the rider's medical condition given on the Medical Consent Form.

I agree to CTRC sending me information and updates about CTRC activities/events on my email address.

I (participant/ parent/ guardian /carer) agree to the release of the relevant information about the participant's medical condition on the understanding that such information will be used ONLY to assist the rider to more fully benefit from the CTRC programme.

If necessary the staff at CTRC are authorized to give paracetamol, ibuprofen or antihistamine.

Signature:..... **Date:**.....

The Centre reserves the right to refuse a person access to the programme if it is reasonably believed that participation may be detrimental to the Person, the Coaches, Helpers or the Horses.

Assumption of Risk Form

Description of activities

Note: Section 74 of the Trade Practices Act ("the Act") implies a warranty of due care and skill into contracts for the supply of services to consumers as defined in the Act. To the extent that the warranty applies to any contract relevant to the Release and Waiver of Liability, it cannot be excluded.

1. The Parent/Guardian must disclose any pre-existing medical or other condition that may affect the risk that either the Child/Minor or any other person will suffer injury, loss or damage.
2. The Parent/Guardian acknowledges that the proprietor relies on the information provided by the Parent/Guardian, and the Parent/Guardian states that all such information is accurate and complete.
3. The Parent/Guardian acknowledges that horse riding is an inherently dangerous activity. The Parent/Guardian recognizes that there are risks specifically associated with the activity, some of which include: the unpredictability of animals, especially when they are frightened or hurt, no matter how well trained they are. The remoteness of the areas in which a ride takes place, sudden and unexpected changes in weather. Physical exertion for which the Child/Minor may not be prepared. Difficulties in evacuation if the Child/Minor is or becomes disabled.
4. The Parent/Guardian understands and has explained to the CHILD/MINOR the dangers associated with the consumption of alcohol or any mind altering substance before or during a ride, and the Parent/Guardian accepts full responsibility for injury, loss or damage associated with the consumption of alcohol or any mind altering substance.
5. The Parent/Guardian Agrees with the Proprietor and has explained to the CHILD/MINOR that they will obey and will comply with all rules and directions made to given by the Proprietor in connection with the ride. In particular, the CHILD/MINOR has been advised to wear an approved helmet at all times during the ride. If a CHILD/MINOR fails to comply with the Proprietor's rules and/or directions, the CHILD/MINOR will not be permitted to ride or continue to ride, and no refund will be given.
6. The Parent/Guardian accepts all risks associated with the activity, including the possibility of injury, death, loss or damage.
7. The Parent/Guardian agrees to indemnify the Proprietor against all claims by any other person against the Proprietor in respect of any injury, loss or damage arising out of or in connection with the CHILD/MINOR 's failure to comply with the Proprietor's rules and/or direction.
8. The Parent/Guardian agrees and acknowledges that, to the extent permitted by the law, The Proprietor's shall not be liable for any injury, loss or damage suffered by the CHILD/MINOR or by any person arising from or in connection with the CHILD/MINOR 's participation in the ride, whether such injury, loss or damage was caused directly or indirectly by the negligence of the proprietor or otherwise, or by the proprietor's servants or agents. The Parent/Guardian hereby releases the Proprietor of all such claims, and indemnifies the Proprietor against all claims made by or on behalf of any other person.
9. To the extent permitted by law, the Parent/Guardian acknowledges and agrees that all warranties, covenants and stipulation's are hereby excluded.
10. All accidents, injuries, loss or damage must be reported by the Parent/Guardian/Child/Minor to the Proprietor before the CHILD/MINOR leaves the Proprietor's property.
11. If the CHILD/MINOR suffers any injury or illness, the Parent/Guardian agrees that the Proprietor may provide evacuation, first aid and medical treatment at the Parent/Guardian expense, and the Parent/Guardian accepts these terms and conditions constitutes the Parent/Guardian consent to such evacuation, first aid and medical treatment.
12. I acknowledge that I have read this Assumption of Risk Form and that it has been explained to me. I fully understand its terms and that I have given up substantial rights by signing it. I signed this document freely and voluntarily without any inducement made to me and intend my signature to be complete and unconditional release of all liability to the greatest extent allowed by law.

Attention all riders, carers, parents at CTRC

*****For your safety and that of other riders please note the following:*****

Your participation at CTRC is conditional on accepting that your coach has the authority to refuse to allow you to either commence the ride or to continue riding if they deem that your behaviour, state of health or abilities are diminished to the point where you may endanger the safety and welfare of yourself, other riders, staff/volunteers and the horses.

I (name of participant/carer/parent)

agree to abide by the following for the safety of myself and others at CTRC:

- follow all instructions of the coach immediately and to the best of my ability
- will accept all decisions of the coach
- will behave with good grace
- parents/carers will not interrupt the coach or speak to riders during lessons.

Print Customers Name/s _____

Print Parent/Guardian _____

Parent/Guardian
Signature _____

I have explained the contents and effect of this document to those signed above.

Signature of Proprietor