

RELEASE & WAIVER OF LIABILITY INDEMNITY AGREEMENT

FOR THE AUSTRALIAN TEAM PENNING ASSOCIATION INC, ALL its OFFICE BEARERS & MEMBERS

1055 BLACKSNAKE ROAD KILKIVAN QLD 4600 PHONE 54841331

In consideration for my being let participate in Team Penning run by the Australian Team Penning Association Inc. I hereby agree that

- Team Penning can be a dangerous activity
- I understand and acknowledge the rules and safety requirements of the event in which I wish to participate
- I understand that serious **INJURY, DISABILITY OR EVEN DEATH** may result from Team Penning or other riding events that I may participate in on the day
- I understand and acknowledge that I **RIDE AT MY OWN RISK**
- I hereby waive, release all my legal rights to legal action against the above Association from any claim for loss, damage, injury, death or permanent disability howsoever arising & incidental to myself (or my child) attending at and/ or taking part in the events organized by this association. This waiver includes but is not limited to liability for any negligent or tortuous act or omission, breach of contract or breach of statutory duty on the part of the Association, & I release the Association its' assigns, Office Bearers, Volunteers, Employees or Agents from all such claims, whether caused by negligence of the releases or otherwise.
- I understand it is my decision to wear or not to wear an approved safety helmet, and understand and acknowledge that by not riding with a safety helmet I may receive serious head injuries, permanent disability or even death in the event of an accident (all riders 18 and under MUST wear a helmet)
- I understand and acknowledge not to ride whilst under the influence of drugs or alcohol
- I understand not to ride in a dangerous manner which may cause injuries to others or myself
- I declare that my saddle, my horse and myself are in sound condition
- I consent to receiving medical treatment &/ or ambulance transport if the organizers deem it necessary

I HAVE READ THIS RELEASE AND WAIVER LIABILITY INDEMNITY AGREEMENT AND FULLY UNDERSTAND ITS TERMS AND FURTHER UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME & INTEND THAT MY SIGNATURE BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

BY SIGNING HEREUNDER I CONFIRM THAT I HAVE READ & UNDERSTAND THE CONTENT OF THIS WAIVER

PRINT NAMES

SIGNATURE

DATE

PARENT OR GUARDIAN CONSENT FOR COMPETITORS UNDER 18 YEARS OF AGE

I ----- being the parent/guardian of the child known as....., confirm that I have read the whole waiver and have taken all necessary actions to ensure I am aware of Team Penning above child will be participating in & consent to his/her participation. By signing this waiver I confirm having read & understood the contents of this disclaimer & note this document constitutes a complete & unconditional release of all liability of the Australian Team Penning Association Inc to the greatest extent allowed by law in the event of me and/or my child under my care against suffering injury or death.

Print name _____ Signature _____ Date _____