

# GIPPSLAND CAMPDRAFTING ASSOCIATION INC

***I hereby apply to become a member of the Gippsland Campdrafting Association Inc. for the season 2011/2012 – FEES ARE DUE BY 30/09/2011***

## **PLEASE COMPLETE THE FOLLOWING IN BLOCK LETTERS**

FULL NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ POSTCODE: \_\_\_\_\_ PHONE NO: \_\_\_\_\_

Email address (optional) \_\_\_\_\_  
(Membership required – please circle one (1) only as a separate signed form is required for each member)

DATE OF BIRTH IF UNDER 18 \_\_\_\_\_ M/SHIP 2011/12 NUMBER \_\_\_\_\_  
Membership Number will be allocated by Secretary and will appear on the front of your Calendar

### **FEE STRUCTURE FOR GCA INC. SEASON 2011/2012**

**GCA has public liability insurance and rider's insurance**

- **Adults - \$90** due by 30/09/2011
- **U17 and U13 - \$15** due by 30/09/2011
- **Non Competing Adults - \$25** due by 30/09/2011
- **Weekend Draft Permits - \$ Adults \$30 / U17 & U13 \$10 due prior to drafting – waiver form must be signed at same time**

**IF YOU WISH TO DIRECT DEBIT, BANK DETAILS ARE AS FOLLOWS – WESTPAC BANK, BAIRNSDALE BRANCH BSB 033-203 ACCOUNT NO. 41 1302 – PLEASE MAKE SURE YOU PUT YOUR NAME AS REFERENCE AND RETURN THIS FORM TO ME ASAP! OR FORWARD A CHEQUE/AMO FOR \$ \_\_\_\_\_ FOR (NUMBER OF) \_\_\_\_\_ MEMBERSHIPS FOR THE SEASON 2011/2012 – CHEQUE/AMO TO BE MADE OUT TO GCA INC. AND POSTED WITH THIS FORM FULLY COMPLETED AND SIGNED TO GCA SECRETARY, PO BOX 62, YARRAM 3971 (MEMBERSHIP WILL NOT BE ACCEPTED WITHOUT SIGNED FORM**

The GCA Calendar will be forwarded upon receipt of form and payment. Please do not hesitate to contact GCA Secretary on 51 891 272 or email [karen@harboursat.com.au](mailto:karen@harboursat.com.au) for any information regarding drafts, schools etc.

### **RELEASE & WAIVER OF LIABILITY**

Name of Seller:

***Gippsland Campdrafting Association Inc.***

Description of recreational services sold:

***Annual Membership for Gippsland Campdrafting Association Inc.'s sanctioned events for the period 1 October 2011 to 30 September 2012***

Declaration and signature of person about to use these services:

- I understand that the recreational services (Campdrafting) about to be sold as set out in this form may cause my death or my personal injury
- By signing this form I understand I waive my rights to sue the Gippsland Campdrafting Association Inc. and its members for losses relating to my death or my personal injury that are a result of my taking part in the sport of campdrafting
- I understand that if the seller has not complied with any law about the proper completion of this form and how my signature is obtained (for example, if the seller has made a false or misleading statement in relation to the steps taken by the seller to avoid the danger of death or personal injury) or has acted recklessly, the seller cannot enforce this waiver.

Signature:	Address:
Printed Name:	
Date:	Postcode:

### **RELEASE & WAIVER OF LIABILITY**

#### **PARENT/GUARDIAN CONSENT FOR UNDER 18 YEAR OLD PARTICIPANTS**

I, ..... being the parent/guardian of ..... the person named on this form, confirm that I have read the whole of this document and have taken all necessary actions to ensure that I am aware of the danger of the activity which the person named on this form, will be asked to participate in and consent to him/her participating.

**GCA APPLICATION FOR HORSE REGISTRATION 2011/12**

**NOTE: This form is optional for new 2011/12 members**

Name of Horse :.....

( Name to be drafted as ):.....

Sex : .....(Stallion,mare,gelding)

Status : .....(Maiden ,Novice,Open)

Name of Member registering horse:

.....

Address:.....

.....

Membership No:.....Date:.....Signed:.....

If you are a current financial member of the Australian Stock Horse Society and your horse is “ Eligible To Compete” please supply the following:

Horses Registered Name ( in full ):.....

Horses Registration Number:.....

Financial Member’s Name:.....

Financial Member’s Number:.....

Any other comments: