

BIB NUMBER

ETS Card Number

RIDING WEIGHT:

kg

<b>EVENT NAME:</b>		<b>DATE:</b>	
<b>RIDE DISTANCE:</b>		km	

**RIDE ENTERED:** (Please circle ride in which you are entering)

<b>Endurance</b>	<b>Marathon</b>	<b>FEI</b>	<b>Training Ride</b>	<b>Introductory Ride</b>	<b>Mini Marathon</b>	<b>Harness</b>
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RIDER DETAILS		HORSE DETAILS	
<b>RIDER NAME:</b>		<b>HORSE NAME:</b>	
AERA MEMBERSHIP NUMBER: _____ OR DAY MEMBER <sup>1</sup> (Please Tick) <input type="checkbox"/> OR INTERNATIONAL RIDER (Please Tick) <input type="checkbox"/>		AERA NUMBER: _____ OR DAY MEMBER <sup>1</sup> (Please Tick) <input type="checkbox"/> OR INTERNATIONAL HORSE (Please Tick) <input type="checkbox"/>	
<b>NOVICE</b> <input type="checkbox"/>	<b>ENDURANCE</b> <input type="checkbox"/>	<b>NOVICE</b> <input type="checkbox"/>	<b>ENDURANCE</b> <input type="checkbox"/>
<b>RIDING DIVISION: (Endurance Rides Only)</b>		<b>PIC NUMBER:</b>	
HEAVYWEIGHT <input type="checkbox"/>	MIDDLEWEIGHT <input type="checkbox"/>	<b>HORSE VACCINATED FOR HeV: Yes / No</b> Date of Last Booster: / /	
LIGHTWEIGHT <input type="checkbox"/>	JUNIOR <input type="checkbox"/>	<b>HORSE VACCINATED FOR Strangles: Yes / No</b> Date of Last Booster: / /	
DAY MEMBER ONLY		DAY MEMBER ONLY	
<b>RIDER DOB:</b>		<b>HORSE DOB:</b>	<b>DOB or AGE:</b>
<b>ADDRESS:</b>		<b>BREED</b>	
		STALLION <input type="checkbox"/> MARE <input type="checkbox"/> GELDING <input type="checkbox"/>	
<b>POST CODE:</b>	<b>PHONE:</b>	<b>Microchip No</b>	
<b>EMAIL:</b>		<b>RIDE SECRETARY USE ONLY:</b> <b>HORSE HEALTH DECLARATION COLLECTED:</b> <input type="checkbox"/>	
FEI RIDES ONLY:		FEI RIDES ONLY:	
EA Number:		EA Number: _____	
FEI Number:		FEI Number: _____	

<b>REPOSIBLE ADULT NAME:</b>		<b>Contact number:</b>	
<b>SIGNATURE:</b>			

Note:

1. Day membership does not include Personal Accident insurance, it is for Public Liability insurance only.
2. Please sign Trainer and Rider Declarations on page 2 of this form.
3. The Parent/Guardian declaration MUST be signed for ALL junior riders by a parent or legal guardian.

**RIDER DECLARATION [To be completed by every rider]**

I declare and agree that I will abide by all current Australian Endurance Riders Association Inc. Rules & Procedures and the appropriate Division Association Rules & Procedures and will conduct myself in a manner not injurious or prejudicial to the character or interests of the sport of Endurance Riding.

In consideration of the Ride Committee accepting this entry I hereby, for myself, my heirs, executors and administrators, waive and release the Ride Committee and all persons or organisations associated with the Ride together with their heirs, executors and administrators and assignees from any rights, claims or liabilities for damages or injuries sustained by me or my support crew or my animals. I acknowledge that the wearing of compliant Australian Standards Association head protection is compulsory for all riders. If my horse requires treatment, I undertake to pay for that treatment prior to leaving the ride base.

Where I am not the Trainer of the horse, I declare that I have made reasonable enquiry of the Trainer of the horse to confirm that the horse is free of any prohibited or banned substance as required in the AERA EADCM Rules.

Rider's signature ..... Date : / /

**TRAINER DECLARATION [To be completed for every horse]**

I declare that :

- a) I have principally been responsible for the primary care, custody and control of this horse in preparation for this ride including but not limited to the oversight of the exercise, nutritional and veterinary program for the horse and
- b) any and all representations regarding this horse are true and correct and
- c) I acknowledge the AERA EADCM Rules and declare this horse to be free of any prohibited or banned substance as required in the AERA EADCM Rules.
- d) As required under the AERA EADCM Rules, I have completed AERA Form 6 and/or Form 7 in relation to medication administered to this horse in the immediate 28 days prior to this ride and I acknowledge that I am required to present Form 6 and/or Form 7 to the head veterinarian at the pre-ride inspection of this horse and
- e) On the basis of my observations over the past two weeks regarding the eating, drinking, urinating, defecating and general behaviour of this horse, I declare the horse entered in this event is healthy and where required, the formal Bio Security / Horse Health Declaration and temperature log have been diligently and truthfully completed.

Trainer's name [print] .....

Trainer's Division [full riding] membership No ..... Division .....

Trainer's signature ..... Date : / /

Note: The Trainer must be a current full-riding member of a Division except if the horse is entered in an Introductory, Intermediate or Mini-Marathon ride, in which case, the rider of the horse may complete the Trainers Declaration as a day member.

**PARENT / GUARDIAN DECLARATION [To be completed for all juniors at every ride they enter]**

I declare and agree that [junior's name] ..... will abide by all current Australian Endurance Riders Association Inc. Rules & Procedures and the appropriate Division Association Rules & Procedures and will conduct themselves in a manner not injurious or prejudicial to the character or interests of the sport of Endurance Riding.

In consideration of the Ride Committee accepting this entry I hereby for myself and [junior's name] ..... our heirs, executors and administrators, waive and release the Ride Committee and all persons or organisations associated with the Ride together with their heirs, executors and administrators and assignees from any rights, claims or liabilities for damages or injuries sustained by myself or [junior's name] ..... or their support crew or their animals. I acknowledge that the wearing of compliant Australian Standards Association head protection is compulsory for all riders. If the horse requires treatment, I undertake to pay for that treatment prior to leaving the ride base.

Parent or Guardian signature ..... Date : / /

Parent or Guardian name ..... Phone:.....