### ENTRY FORM - BALAKLAVA AGRICULTURAL SHOW - H-I-A SECTION

# Entries Close Monday, 16th September 2024

Post Entries: Balaklava Show, Horse Section, PO Box 181, Balaklava, SA, 5461 Email Entries: balakshow@gmail.com

Please make Cheques Payable to Balaklava & Dalkey Show Society
Direct Deposit: Balaklava Show Ag Society - BSB 015525 - A/C 298798587
\* ENTRIES WILL NOT BE ACCEPTED if no cheque or Direct Deposit Receipt attached!

**MEMBERSHIP** is Compulsory: (also riders and handlers must have membership)

Horse Section Membership - \$30.00 (2 Adult+2Child)

Entry Fee - \$3.00 per class - Fancy Dress No Fee

Breed

Member/

Handler

A1234

Name: Horse/

**Exhibitors Signature** 

Rider or Handler

Example: Tonto/Lone Ranger

No Entrance Tickets Posted! Exhibitors name will be checked at Horse Gate!

Ring

3

Class

3.90

3.119

Etc.

3.112

Breed

No.

Registrar

B123456

CHECK LIST: \$3.00			]	Entry No.	@ \$3.0	00 \$	
*Entry Form Filled Out Correctly & Signed *Property Pic Number included				Membership \$30.00  Admin/Ground Levy Fee \$10.00			
* Payment-Cheque or Direct	Deposit I	Receipt at	tached		Do	onation \$	
* Waiver Form Filled Out Correctly & Signed				TOTAL AMOUNT \$			
Exhibitors Name							
Exhibitors Address				Post	Code		
Mobile		Property Pic Number SA					
Email Address							
F 1711 - 61							



Thorough Care SA classes are open to Thoroughbreds that meet the following criteria: Horses that have been unraced or trialled but were purchased through a recognised auction house ie: magic millions, Inglis, blood stock auction; Horses that have raced or trialled; Horses that have been unraced or trialled but have an active stable return during their life

Horse Race Name:				
Life Number:				
Brand Near side Shoulder:				
Brand off side				
shoulder:				
White markings:				
Sire:				
Dam:				
Racing career if known:				
Exhibitor Details:				
Name of Exhibitor:				
Address:				
Contact number:				
PIC number:				
Email:				
I(exhibitor name), give permission for Thorough Care SA to keep the above data on records as a way to track my Thoroughbred.				
Signature				

#### Agricultural Societies Council of South Australia Incorporated

## BALAKLAVA & DALKEY AGRICULTURAL SHOW – Saturday 28st September 2024

### HORSE HANDLING PARTICIPANT RISK ACKNOWLEDGEMENT & WAIVER

ime of	
rticipant:rticipant	
ldress:	
ontact Number of Participant:ail:	
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Agricultural Societies Council of South Australia Inc and Balaklava & Dalkey Agricultural Show (together **the Suppliers**) advise that participation (including passive participation) in animal handling at an agricultural show contains elements of risk, both obvious and inherent. The handling of animals is a dangerous recreational activity as animals can act in a sudden and unpredictable way, especially when frightened or hurt.

- 1. By signing this waiver I acknowledge that:
  - 1. participation in animal handling is a recreational service for the purposes of section 139A of the **Competition** and **Consumer Act (Cth) 2010**, and also a recreational activity for the purposes of Section 42 of the **Fair Trading Act (1987) SA**;
  - 2. participation in animal handling is a hazardous activity and may result in injury, loss, damage or death to me;
  - 3. participation in animal handling requires certain skills and experience. I declare that I have sufficient skills and experience to be able to safely and properly participate in the events;
  - 4. animals can act in a sudden and unpredictable ways, especially if frightened or hurt, or if exposed to loud or unfamiliar noises;
  - 5. animal showing events will be held in close proximity to rides and large groups of people, and that there may be loud and unfamiliar noises which can frighten animals;
  - 6. if the event is held outdoors, there are risks to me as a result of the weather conditions, including either extreme hot or cold weather, rain or wind;
  - 7. insects or other animals may cause animals to become frightened and act in an unpredictable way;
  - 8. there is inherent in events involving the handling of animals the risk of suffering injury including injuries caused by animals; and
  - 9. I use the facilities supplied for the event entirely at my own risk, as I find them and with the prior acceptance of the risk of possible danger to me.
- 2. If I suffer injury, loss or damage (**Loss**) while participating in an animal handling event, I will not hold the Suppliers, their employees or agents legally responsible for any Loss I suffer. I will not sue the Suppliers, their employees or agents for any claims, costs, damages or liability. I agree to release the Suppliers and their employees from legal responsibility for the services I have been provided and/or activity I have participated in.
- 3. I acknowledge and agree that my participation in the event and associated activities is dangerous and may have inherent risks as a result of which personal injury (and sometimes death) may occur. I acknowledge that the event and associated activities carry with them a significant risk of physical harm. I accept and assume all such risks of personal injury or death in anyway whatsoever arising from these activities and hereby waive my individual right to sue the Suppliers for all claims I or my representatives may have for such personal injury or death against the Suppliers in any way whatsoever arising from or in connection with these activities.
- 4. At the time of participating in the event, I have not been to any degree under the influence of alcohol or illicit drugs.
- 5. I will not consume any alcohol or illicit drugs while participating in the Event and agree that such use may result in my being excluded from the Event or other events with no entitlement to any refund of money paid for entry to the Suppliers.
- 6. I agree to be bound by the rules and guidelines of the Agricultural Societies Council of South Australia Inc as varied from time to time.

Name of Horse	Horse Owner of horse Microchip No. or Reg. or Description (sex. cobrand).		Pic. No.	Last Event & Date			
are fit and healthy ar	I, the owner/rider/exhibitor of the above horse/s, declare that, to the best of my knowledge, it is/they are fit and healthy and I agree that if found to be otherwise it/they will not be allowed to compete at this event.  Date						
I agree that I have rebe binding on my he I acknowledge that t document in reliance herein.	eirs, next of kin, execut the Suppliers have perfole e upon the matters ack ver shall be governed	of age: s waiver prior to signing tors and administrators. mitted me to participate in knowledged by me and the in all respects by and into	n the activity the representat	the subject of this ions I have made			
Signature:		Dated:/		/			
Participant's Date of I	onsent to my child part e read and understood a that this agreement wi histrators. The Suppliers have peri ment in reliance upon t	ars of age (to be comple , being a parent or legal ticipating in this event. and explained to the parti Il be binding on my (and mitted the participant to p the matters acknowledged in all respects by and into	guardian of t cipant, this w his/her) heirs articipate in t I by me and th	he above named aiver prior to , next of kin, he activity the ne representations I			
Signature:		Dated:	/	/			