



GROUND HIRE FORM
TAX INVOICE

Mount Gravatt District Horse and Pony Club Inc.

475 Priestdale Rd, Rochedale,

www.mtgravattponyclub.org.au

Ground Hire Co-Ordinator:

Mob: 0448 174 678

Mob: 0438 716 975

One Person/Rider per Form.

Completed Horse Health Declarations to accompany this form

EA / PCAQ / Membership # (If applicable): _____

Name: _____ **DOB:** _____

Address: _____

Phone Number: _____ **Email:** _____

Ground Hire @ \$25.00 / Day No. Days _____ **x \$25.00 =** _____

Yard Hire @ \$10 / horse / stay No. Yards _____ **x \$10.00 =** _____

Total Amount Payable: \$ _____

Cash/Chq/Internet Banking Details: Mt Gravatt District Horse & Pony Club Inc BSB 084 129 A/C 04905 9409 Use Surname & GH as Reference

WAIVER (Please read & Sign). *HORSE HEALTH DECLARATIONS TO ACCOMPANY THIS FORM

In consideration for being permitted to participate in any way in horse sport activities, I, the undersigned, understand, acknowledge and accept that:

Horse Sports are a dangerous activity and horses can act in a sudden and unpredictable (changeable) way, especially if frightened or hurt. There is a significant risk that serious **INJURY** or **DEATH** may result from horse sport activities. I understand and acknowledge the dangers associated with the consumption of alcohol or any mind altering drugs and agree not to drink alcohol or take drugs prohibited by law before or during any horse sports activities.

I agree to follow the directions of any event organiser, or official and that any misconduct or refusal by me to follow any direction of any organiser, or official can result in the **CANCELLATION** of my participation in the activities and my immediate removal from my horse **NO MATTER** where that may occur.

I agree to wear an approved helmet at all times whilst participating in the sport where this is required under the relevant PCAQ, EA and FEI rules and regulations.

I have had sufficient opportunity to read this Dangerous Activity Acknowledgment and fully understand its terms and sign it freely and voluntarily.

Dated: ___/___/___ **Signature of Rider :** _____

For Participants of Minority Age (Under Age 18)

This is to verify that I, as a parent/guardian with legal responsibility for this participant, acknowledge, understand and accept ALL OF THE ABOVE and consent and agree to my minor child's involvement or participation in horse sport activities.

Dated: ___/___/___ **Signature of Guardian:** _____

Name: (Please Print) _____

****ALL PRICES INCLUDE GST. PLEASE COMPLETE THE ABOVE, SIGN THE INDEMNITY AND RETURN WITH REMITTANCE TO THE CLUBHOUSE , INTERNET BANKING OR POST TO THE CLUB ADDRESS, MARKED ATTENTION GROUND HIRE CO-ORDINATOR.**