
**RELEASE AND WAIVER OF LIABILITY
OF THE AUSTRALIAN HUNTER HORSE ASSOCIATION INCORPORATED
(incorporated under the *Associations Incorporation Act 1984*)**

I understand and acknowledge that **HORSE RIDING IS A DANGEROUS ACTIVITY** and that horses can act in sudden and unpredictable ways, especially if frightened or hurt.

I understand and acknowledge that **PROPERTY LOSS, SERIOUS INJURY OR DEATH** may result from horse related activities, including riding and passive participation in horse events. I understand that this applies in particular to any horse riding activities that I participate in which are organised by or associated with the Australian Hunter Horse Association Incorporated.

I agree not to drink alcohol or take drugs prohibited by law while taking part in any horse riding activities. I agree to follow instructions of the ride leader/ instructor, event organisers, volunteers and any other persons appointed by the Australian Hunter Horse Association and that my misconduct to follow any directions from these persons will result in termination of my involvement in the activity and removal from my horse **NO MATTER** where that may occur.

I agree always to wear an ASA approved safety helmet, when riding and appropriate footwear at all times that I am in contact with horses. I further agree to ensure that my riding equipment is free from defect.

Please choose from the following:

() I am in good health and have no disabilities

() I have the following disabilities:

Australian Hunter Horse Association Incorporated. 

AUSTHUNTERHORSE@GMAIL

I understand that by signing this document I have made a complete and unconditional release of all liability of the Australian Hunter Horse Association Incorporated to the greatest extent allowed by law in the event of myself and/ or any minors or animals under my care suffering any loss, injury or death. I agree that I undertake any such risk voluntarily of my own free will and at my own risk.

Signature: _____ Name: _____

Parent/ Guardian Signature: _____ Name: _____

Address: _____ Postcode: _____