



Indemnity Form

Brookleigh · 1235 Great Northern Highway · Upper Swan · WA 6069
Telephone 9296 0018 · Fax 9296 0014 · Email info@brookleigh.com.au

RELEASE AND WAIVER OF LIABILITY

Name of Rider _____

Name of Guardian, if Rider under 18 years _____

Address (Street) _____

Suburb _____

State _____

Postcode _____

Email _____

Telephone _____

Mobile _____

Date of Birth _____

Rider's / Parent's Occupation _____

EA Membership No. _____

Emergency contact _____

Phone _____

Discipline: Eventing ☐ Showjumping ☐ Dressage ☐ Other (Please specify) ☐

Horse Riding is a Dangerous Activity:

- I understand and acknowledge that horse riding is a dangerous activity and that horses can act in a sudden and unpredictable (changeable) way, especially if frightened or hurt.
- I understand and acknowledge that serious **injury** or **death** may result from horse riding activities.
- I agree that I **ride** at my **own risk**.
- I agree not to drink alcohol or take drugs prohibited by law whilst riding a horse or handling horses.

Agistment

I understand and acknowledge that horses agisted in yards, stables or paddocks at Brookleigh are agisted at my own risk. Brookleigh & its directors are expressly not liable for any loss or damage that may occur while my horse(s) are on the property of Brookleigh.

Conduct

I agree to follow the rules and regulations as set out in the registration form for Brookleigh and that any misconduct or refusal by me to follow any direction will result in **CANCELLATION** of my booking and immediate removal from Brookleigh **NO MATTER** where that may occur. I agree to wear a helmet and the necessary safety gear whilst riding a horse.

Effect of this Document

I understand that my signature to this document constitutes a complete and unconditional release of all liability of Brookleigh Estate and its directors, Equestrian Australia Ltd, including all of its state bodies, coaches and affiliated clubs, to the greatest extent allowed by law in the event of me and/or the children under my care, suffering injury or death.

Dated _____

Signature of Rider/Guardian _____

Where did you hear about Brookleigh? Yellow Pages ☐ Word of Mouth ☐ Local Paper ☐ Driving past ☐
Equestrian Australia ☐ Website/Search Engine ☐ Other.....☐

Are you happy to receive information by email? Yes ☐ No ☐ Please tick any of the following areas of interest.

Equestrian Activities ☐ Conference Facilities ☐ Wedding Services ☐ Events at Stewart's Restaurant ☐
Corporate Team Building Packages ☐ Brookleigh for Schools ☐ Health & Spa at Brookleigh ☐