

**PARENTAL CONSENT AND INDEMNITY**

*(To be completed where a participant is aged under 18 years)*

NAME OF PARTICIPANT: \_\_\_\_\_

NAME OF FACILITY: CALLIOPE SLIDERS REINING HORSE CLUB Inc

DATES OF PARTICIPATION – FROM: \_\_\_\_\_ TO: \_\_\_\_\_

This document is a deed poll in favour of Calliope Sliders Reining Horse Club Inc. **(Supplier)** and its officers, employees, representatives, agents, contractors, and volunteers **(Personnel)**.  
I, the undersigned, am aged over 18 years of age and am a parent or legal guardian of the above-named participant **(Participant)**.

I consent to the Participant attending the Calliope Sliders Reining Horse Club Inc. **(the Centre)** for the activities described above, including participating in the events and activities offered by the Supplier or otherwise in connection with it **(Activities)**.

I acknowledge and agree:

- that the Participant and I have read and understood the Centre's rules and any other rules applying to the Activities;
- that the nature of the Activities may include:  
Horse related activities – Horse Riding, Horse Training, Horse Handling.
- and that risks may arise during these and other Activities, including the risk of Personal Injury (as defined below); that the Supplier and its Personnel would be unable to feasibly operate the Centre if they were liable for such risks;
- and that the Participant attends the Centre and participates in all Activities at my own risk.

I indemnify SUPPLIER and each of its Personnel against any and all losses, costs, damages, expenses and liabilities (including legal costs on a full indemnity basis) sustained or incurred by SUPPLIER or any of its Personnel in connection with:

- any claim, action, demand or proceedings (whether based in contract, tort (including negligence) or otherwise) by any person in relation to any Personal Injury occasioned by the Participant at, or as a result of, the Centre, or in the course of, or as a result of, any Activities;
- any failure of the Participant to follow any rules of the Centre or any directions given by SUPPLIER or its Personnel; or
- any act or omission of the Participant at the Centre or in the course of any Activities which causes or contributes to Personal Injury to any person.

In this deed poll, a reference to Personal Injury includes death; physical or mental injury (including the aggravation, acceleration or recurrence of such an injury); the contraction, aggravation or acceleration of a disease; the coming into existence, the aggravation, acceleration or recurrence of any other condition, circumstance, occurrence, activity, form of behaviour, course of conduct or state of affairs:

- that is or may be harmful or disadvantageous to the person who suffers it or the community, or
- that may result in harm or disadvantage to the person who suffers it or the community.

I agree that in the event of the Participant being involved in an accident, becoming ill, or otherwise requiring medical treatment or care, SUPPLIER or its Personnel may, in their absolute discretion, obtain medical treatment for the Participant and that I must pay all expenses incurred in obtaining such medical treatment or care.

Signed, sealed and delivered as a deed poll  
by parent or guardian of Participant who is under 18 years:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name (print): \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_