

RIDE	ENTRY	FORM

NSWERA Inc

BIB	NO:

		WEIGHT:		ETAG NO:			
Ride Name : SHAHZADA 2021							
Ride Type:		Distance	Start Date:		Division:		Entry Fee:
(please tick one only)		(km)	(dd/mm/yyyy)		(HW or JI	T, MWT, LWT NR ¹)	
	400km Marathon all riders	400	23/8/21				\$570
	Mini Marathon riders 17 years and over	120	24/8/21		n/a		\$320
	Mini Marathon riders (16 years and under)	120	24/8/21		n/a		\$270
If not a current member of an AERA division – International riders – Day Membership						\$15	
DAY MEMBERS MUST SIGN INSURANCE WAIVER							
¹ A Junior rider is one who attains the age of 17 years or less in the year of the ride. Power					\$50		
Every Junior rider must have:				\$50			
A parent or guardian complete the Parent/Guardian Declaration; and					,		
if the Parent/Guardian does not attend, a Responsible Adult to complete the Responsible Adult section below. Total					\$		

Rider's Name: DOB (day members & Juniors):							
Are you a current member of	of a Division? [please circle]	NO	YES				
If Yes: State Me	mbership No		Status [c	ircle]:	Endurance	/ Novice	/ Intermediate
Address :							
				State :		Postcode	e:
Phone :	Email :						
Emergency Contact:			Phone	e:			
I acknowledge that I will be above if required.	nior rider: [Does not need be present at the ride base and v	will be pre	pared to act	as a re			
Horse's Name :							
Date of Birth :	Breed :				Sex [circle] :	М /	G / S
Does your horse have an AE	RA logbook? [please circle]	NO	YES				
If Yes: AERA Horse No				Stat	us [circle]:	Endurance	e / Novice
Date of last 80km completion	on :						
PIC Number of Horse Prope	rty: (as of 1/1/2020 this is a co	ompulsory	field)				

IMPORTANT DECLARATIONS MUST BE COMPLETED OVERLEAF!

RIDER DECLARATION [To be completed by every rider]

I declare and agree that I will abide by all current Australian Endurance Riders Association Inc. Rules & Procedures and the appropriate Division Association Rules & Procedures and will conduct myself in a manner not injurious or prejudicial to the character or interests of the sport of Endurance Riding.

In consideration of the Ride Committee accepting this entry I hereby, for myself, my heirs, executors and administrators, waive and release the Ride Committee and all persons or organisations associated with the Ride together with their heirs, executors and administrators and assignees from any rights, claims or liabilities for damages or injuries sustained by me or my support crew or my animals. I acknowledge that the wearing of compliant Australian Standards Association head protection is compulsory for all riders. If my horse requires treatment, I undertake to pay for that treatment prior to leaving the ride base.

Where I am not the Trainer of the horse, I declare that I have made reasonable enquiry of the Trainer of the horse to confirm that the horse is free of any prohibited or banned substance as required in the AERA EADCM Rules.

Rider's signature .	 Date :	/	/2021

TRAINER DECLARATION [To be completed for every horse]

I declare that:

- a) I have principally been responsible for the primary care, custody and control of this horse in preparation for this ride including but not limited to the oversight of the exercise, nutritional and veterinary program for the horse
- b) any and all representations regarding this horse are true and correct and
- c) I acknowledge the AERA EADCM Rules and declare this horse to be free of any prohibited or banned substance as required in the AERA EADCM Rules.
- d) As required under the AERA EADCM Rules, I have completed AERA Form 6 and/or Form 7 in relation to medication administered to this horse in the immediate 28 days prior to this ride and I acknowledge that I am required to present Form 6 and/or Form 7 to the head veterinarian at the pre-ride inspection of this horse and
- e) On the basis of my observations over the past two weeks regarding the eating, drinking, urinating, defecating and general behaviour of this horse, I declare the horse entered in this event is healthy and where required, the

	formal Bio Security / Horse Health Declaration and temperature log have been diligently and truthfully completed.						
Trainer's	name [print]						
Trainer's	Division [full riding] membership No:	State Divis	ion				
Trainer's	signature	Date :	/	/2021			
Note:	The Trainer must be a current full-riding member of an AERA Division ex Introductory, Intermediate, Micro-Marathon or Mini-Marathon ride, in w complete the Trainers Declaration as a day member.	•					
	PARENT/GUARDIAN DECLARATION [To be compl	eted if t	he ride	er is a J	Junior]		
I declare and agree that [junior's name]							
In consideration of the Ride Committee accepting this entry I hereby for myself and [junior's name]							
Parent o	r Guardian signature	Date :	: ,	/	/ 2021		