



**STANDARD BRED PLEASURE & PERFORMANCE HORSE  
ASSOCIATION OF SOUTH AUSTRALIA INC**

172 Trevor Clarke Drive  
Mount Schank SA 5291  
Contactspphasa@gmail.com

**MEMBERSHIP  
APPLICATION**

- ☐ SINGLE ANNUAL MEMBERSHIP - \$65  
☐ FAMILY ANNUAL MEMBERSHIP - \$80  
☐ ASSOCIATE MEMBERSHIP - \$35  
☐ JUNIOR ANNUAL MEMBERSHIP - \$45  
☐ LIFE MEMBER ANNUAL FEE - \$15

PREVIOUS MEMBERSHIP  
NUMBER:

I hereby apply for Membership with the Standardbred Pleasure and Performance Horse Association of South Australia Inc. and agree to abide by the rules and regulations of the association, and decisions of the ruling committee during the period of my membership.

**Payment via EFT:** SPPHASA BSB: 105067 ACCT: 027918240

**Payment Reference:** MSHIP\_YourSurname If paying via EFT a copy of the transfer receipt must be supplied with your application. Please ensure medical form is filled and attached with membership form.

First Name

Last Name

Mr. Mrs. Miss. Ms.		
POSTAL ADDRESS:		
SUBURB:		POST CODE:
CONTACT NUMBER:		
EMAIL ADDRESS:		

**FAMILY MEMBERSHIP - MEMBER DETAILS**

NAME:	DATE OF BIRTH:
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**EMERGENCY CONTACT**

NAME:	MOBILE:
RELATIONSHIP:	

I understand and acknowledge that horse sports are 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 sport activities.

I agree that I PARTICIPATE at my OWN RISK and have read, understand, and agree with the Terms & Conditions and the Risk Warning & Waiver of Liability on Pages 3 & 4.

Signature of Participant: \_\_\_\_\_ Date: \_\_\_\_\_

If Participant is under 18, the following is to be signed by a Person Responsible:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY**

**MEMBERSHIP NUMBER ALLOCATED:** \_\_\_\_\_

**DATE MEMBERSHIP RECEIVED AND APPLIED:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**PAID BY:** EFT [ ] CHEQUE [ ] CASH [ ]

**MEMBERSHIP OFFICER:** \_\_\_\_\_



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NOTES: PLEASE READ CAREFULLY BEFORE  
COMPLETING INDIVIDUAL/SUBSCRIBER MEMBERSHIP APPLICATION

**1. MEMBERSHIP YEAR**

This covers the period from the 1st July to 31st June.

**2. ENTITLEMENTS**

**Individual/Single Member:** An individual over the age of 18yrs. A financial Individual Member is entitled to show as many horses throughout the year and be eligible for trophies and awards subject to a registration being in place for each horse with the Association. They may attend any meeting throughout the year and attend and vote at the Annual General Meeting.

**Associate Member:** A financial Associate Member is entitled to attend any meeting throughout the year and also attend and vote at the Annual General Meeting. An associate member is not entitled to show any horses or participate at any show held by SPPHASA Inc. at membership rates.

**Junior Member:** An individual under the age of 18yrs. Please see "Individual Member". Junior members are not permitted to vote at an AGM

**Family Member:** Please see "Individual Member". Details are the same. Membership is for Married/Defacto Couples, Parent(s) and any of their children under 18yrs, abiding at the same address.

**3. CLAIMING TO BE A MEMBER**

No person(s) have the right to claim membership of the Association until such time as being notified in writing by the Secretary or Memberships and Registration Officer, of the Association's approval of the application. Points will only be awarded at nominated point shows from the time (a) the person becomes financial and (b) the horse in question is registered with SPPHASA Inc.

**4. ASSOCIATIONS CONSTITUTION, SOCIAL MEDIA POLICY, RULES AND REGULATIONS**

A copy of these documents are available on the website for viewing and we suggest you read through to know what is acceptable. These can also be supplied immediately on request to applicants at no charge.

**5. CHANGE OF CONTACT DETAILS**

If you change your postal or email address at any time, please notify the Association as soon as you can, otherwise you may miss out on receiving any correspondence.

If you have any queries or require further information on membership or dealing with the Association's Register, please do not hesitate to phone or email the Association's Secretary.

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**PHOTOGRAPHIC CONSENT & RELEASE FORM**

I hereby consent and agree that the Standardbred Pleasure and Performance Horse Association of South Australia Inc. has the right to take or use photographs of me (and/or my horse/s) and to use these in any and all media worldwide including online, now or hereafter known, and for any purpose whatsoever.

I hereby release to the Standardbred Pleasure and Performance Horse Association Inc. all rights to exhibit this work in print and electronic form publicly or privately and to market copies.

I waive any rights, claims or interest I may have to control the use of my identity or likeness in the photographs and agree that any uses described herein may be made without compensation or additional consideration of me.

I represent that I am either at least 18 years of age, have read and understand the foregoing statement, and am competent to execute this agreement. Or that I have read and understood the foregoing statement on behalf of the minor and am the legal parent/guardian of the above minor on Page 1.



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**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Annual Risk Warning and Waiver of Liability**

The following pages affect your legal rights and obligations. Please read these carefully and only sign if you fully understand their contents. For Participants under 18 years of age, these documents must be completed by a parent or legal guardian.

Description of Activities<sup>1</sup>: Any equestrian event that is run by The Standardbred Pleasure & Performance Horse Association of SA Inc, hereby known forth as 'The Provider'

**Risk Warning**

I am aware that by my participation in any activities arranged by the Provider, certain risks or dangers may occur which could include:

- Physical, bodily or psychological injury or death.
- Physical exertion to which I am not accustomed.
- Failure of equipment or use of inadequate equipment.
- There may be no or inadequate facilities for treatment or transport to treatment if I am injured.
- The conditions in which the activities are conducted may vary without warning.
- I may cause injury to other persons and/or other persons may cause injury to me.
- I may be injured or die due to the negligence, breach of contract or breach of statutory duty or guarantee of the provider.

I acknowledge that the activities are being undertaken for the purposes of recreation, enjoyment, or leisure, and involve a significant degree of risk of physical harm.

I acknowledge that the Activity may be undertaken with one or more other persons as part of a group and that the Provider is not liable for the actions of other participants in the group activity.

By signing below, I acknowledge, agree and understand that the risks associated with the Activities and/or recreational services have been explained to me. I undertake any such risk voluntarily and at my own risk. I acknowledge that the risk warning above constitutes a "risk warning" in accordance with the Civil Liability Act 1936 ( [https://www.legislation.sa.gov.au/\\_\\_\\_legislation/lz/c/a/civil%20liability%20act%201936/current/1936.2267.auth.pdf](https://www.legislation.sa.gov.au/___legislation/lz/c/a/civil%20liability%20act%201936/current/1936.2267.auth.pdf) )

**Participant's Warranties**

I agree to abide by any of the Provider's rules, and any direction or instruction given to me by the Provider during the course of the Activities. I agree to use and/or wear any equipment given to me by the Provider. I declare that I am medically and physically fit and able to participate in the Activities.

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<sup>1</sup> Activities includes all activities and services ancillary to or associated with the named Activity, both before and after the Activity, including transportation to and from the location of the Activity whether provided by the Provider or not, briefings, inductions, training, and the provision of information in all manuals, safety guidelines and other documentation provided to or made available to the Participant with respect to the Activity, familiarization with clothing or equipment and methods of operation of equipment and the wearing and removal of any clothing or equipment associated with the Activity. Unless otherwise specified, a reference to an Activity is a reference to a recreational service or a recreational activity as defined in relevant legislation referred to herein.

I agree that if I suffer any injury or illness, the Provider may provide evacuation, first aid and/or medical treatment at my expense and that my acceptance of these terms and conditions constitutes my consent to such evacuation, first aid and/or medical treatment.

I declare that I have not consumed any alcohol or mind altering substance, or medication that may impact my judgement or physical capacity, before or at the time of engaging in the Activities.



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I acknowledge that I must, and agree that I will, disclose any pre-existing medical or other condition, injury or concern that may affect the risk that either I or any other person will suffer injury, loss or damage during the course of the Activities and notify the Provider of any injuries, illness or concerns that may arise during the Activity. I will not engage in any reckless, negligent, or foolish behaviour or any other behaviour that is likely to cause injury to me, any other participant or person.

**Exclusion of Liability**

I agree to and unconditionally release, waive, discharge and forever hold harmless, the Provider or any of its employees, agents, directors or officers, from any claims as a result of any personal injury sustained, whether caused by the Provider's negligent act or wilful act or omission, breach of contract, breach of statutory duty, error, or otherwise in connection with or arising out of the Activities. I agree that the Provider will not be liable for any claims for personal injury that may be brought against it as a result of or in connection with any act, omission, default, failure or error on the part of the Provider, and agree to indemnify and keep indemnified the Provider in respect of any such claims.

**Waiver**

It is possible for a supplier of recreational services to ask you to agree that the statutory guarantees under the Australian Consumer Law (which is schedule 2 to the Competition and Consumer Act 2010 (Cth)) do not apply to you. If you sign this form, you will be agreeing that your rights (or the rights of a person for whom or on whose behalf you are acquiring the services) to sue the Provider in relation to the Provider's services or the activities that you undertake because the services or activities provided were not in accordance with the guarantees are excluded, restricted or modified as set out below.

**Declaration and Signature (Signed on page 1)**

I have read carefully and understand this risk warning and waiver of liability and sign it freely and voluntarily without inducement of any kind.

**For Participants under age 18 (Signed on Page 1)**

This is to certify that I, as a parent/guardian with legal responsibility for the Participant, acknowledge, understand and accept all of the above and consent to his/her release as provided above. I release and agree to indemnify and hold harmless the Provider from any and all liabilities arising from my minor child's involvement or participation in the Activities and/or recreational services, even if arising from the negligence of the Provider.