



# Warringah Dressage Association

## *Rozzie Ryan Clinic*

- Date: Friday 24 February 2012
- Cost: \$140 per lesson (non-members), \$115 (members)
- Location: 35 Walter Rd, Ingleside NSW
- Duration: 45 minutes

Entries are only confirmed once payment and forms are received.  
Enquiries Nik Bliss 0417 264 619

|   |                             |                    |
|---|-----------------------------|--------------------|
| <b>Riders Name:</b>   |                             |                    |
| <b>Address:</b>   |                             |                    |
| <b>Phone:</b>   | <b>EFA No:</b>              |                    |
| <b>E-mail:</b>  |                             |                    |
| <b>Clinic Date:</b> Friday 24 February 2012   |                             |                    |
| <b># Lessons :</b>  | <b>Cost/Lesson: \$</b>      | <b>Total Cost:</b> |
| <b>Horse's name:</b>  | <b>Horse Age and breed:</b> |                    |
| <b>Riding experience:</b>   |                             |                    |
| <b>Competition/ training level:</b>   |                             |                    |
| <b>What are you looking to achieve from the clinic?</b> <i>(Please give this some thought as it provides your instructor with a better understanding of what you would like to achieve)</i> |                             |                    |

Please send completed entry form, EFA waiver & payment to:  
Nik Bliss  
35 Walter Road  
Ingleside NSW 2101

Please make cheques payable to "Warringah Dressage Association"  
Only complete entries with full payment will be accepted

*Please note that to be a part of the clinics held by WDA you **must** be a current WDA or EFA member. Clinic entry fees are NON refundable unless a suitable replacement is found. Depending on number of entries riders may only be able to have one lesson. Please be advised no videoing or photos to be taken without rider and WDA approval. Please see Nik Bliss on the day.*

# WARRINGAH DRESSAGE ASSOCIATION INC.

## Release and Waiver of Liability

### Horse Sports are dangerous activities.

I understand and acknowledge that horse sports are dangerous activities and horses can act in sudden and unpredictable (changeable) ways, especially if frightened or hurt.

I understand and acknowledge that serious **INJURY** or **DEATH** may result from horse sport activities and in particular from events in which I participate. I agree that **I PARTICIPATE AT MY OWN RISK.**

I agree not to drink alcohol or take drugs prohibited by law before or during a competition.

Name of competitor: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Name of Parent or guardian: \_\_\_\_\_

(if competitor is under 18 years)

### Effect of this document.

I understand that my signature to this document constitutes a complete and unconditional release of all liability for the Equestrian Federation of 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.

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature of competitor or guardian: \_\_\_\_\_