

Stalls and Camping Application



Name: _____

Address: _____

Phone: _____

Stalls & Passes	Number	Total Amount
Regular Covered Stalls @ \$6 each		
Stallion Stalls @ \$6 each - (For stallions only – 3 available)		
Discounted competitors pass: Adult: \$10, Child: \$5 (If camping, see below)		

- Stallions must be housed in the stallion stalls when not competing.
- Campers are given priority on covered stall allocation.
- Stall allocation is on a first come basis.

Camping	Number	Total Amount
Camping on grounds @ \$50 per site (Includes 2 complementary competitors passes) (Camping available from Wed 12 th – 9am Thurs 20 th)		
Additional competitors pass: Adult: \$10, Child: \$5		

Sub Total \$ _____

- 1 combination per campsite (IE 1 truck or 1 tow vehicle, float/gooseneck combo)
- Limited camping available inside the grounds. – Nose in or reverse in only. No electric fences permitted in the camping area.
- Additional camping available outside along the eastern fence. (Power and water accessible through the fence).
- Free camping in the gravel area across the road on station street (no power or water).
- All camps and stalls are to be left clean and free of rubbish and manure. If left in an untidy manner, the committee reserves the right to charge a cleaning fee.

Note: Camping and stall allocations will not be secured until payment is received.

See next page for payment instructions.

Dressage Nominations



Name: _____

Address: _____

Phone: _____

- Dressage tests run under EA rules. Test available from <https://www.cloncurryshow.com.au/>
- Dressage competitors may ride no more than two horses in each test and only 2 consecutive tests per horse.
- Horses must be ridden by one rider only in each test, except for the junior led walk, trot test.
- Championships will be judged on one horse/one rider combination.
- Entries close at 5pm Tuesday 11th June 2024.
- **All other event entry tickets can be purchased on the day from the recording tent. EFTPOS or cash available**

Entry Fee: Adults - \$5, Children - \$4

Class	Rider	Horse	Adult or Child	Total

Class 20. Junior Walk/Trot EA Prep Test A – under 12yrs, not to compete in any other dressage event.
 Class 21. Prelim 1.1 – U17, Class 22. Nov 2.1 U17
 Class 23. Prelim 1.2 - 17&O, Class 24. Novice 2.1 – 17&O
 Class 25. Elementary 3.1 – Open all ages.
 Class 26. Stockman’s Dressage A – all ages, snaffle only.

Sub Total \$ _____

Total Payment Amount: \$ _____

Payment to be made with booking.


CLONCURRY & DISTRICT SHOW SOCIETY

Direct Debit: BSB: 034 173 Account: 252 535

Ref: Please use the following as your deposit reference HORSE LAST NAME FIRST INITIAL e.g., HORSE RAE F

****NOTE: ONCE PAID, PLEASE EMAIL YOUR FORM/S TO THE CHIEF STEWARD FOR ACTIONING**

The Chief Steward - Horses
 Cloncurry & District Show
 Cloncurry QLD 4824
 Email to: cloncurryshowhorses@gmail.com
 Contact: Fiona Rae PH. 0427 958 426

 Attach additional forms if necessary.

Horse Event Participant - Waiver, Release and Acknowledgement Form

CLONCURRY SHOW 13 - 15 June 2024

In this Waiver, Release and Acknowledgement Form 'the Show Society' means and includes all affiliated entities; servants or agents of the Cloncurry & Show Society, all employees of the Cloncurry & District Show Society, all members of the Show Society and all volunteers of the Show Society and/or all affiliated entities.

By participating in the Event:

1. I acknowledge that it is a condition of participating in the Event that I do so at my own risk. I accept all risks and release the Show Society from all claims, demands and proceedings arising out of or connected with my participation in the Event and indemnify them against all liability for any injury, loss or damage arising out of or connected with my participation in the Event. This release continues forever and binds all my heirs, successors, executors, personal representatives, and assigns.
2. I acknowledge that it is a condition of participating in the Event that the Show Society and any person or body directly or indirectly associated with the Event are absolved from all liability arising for injury or damage to myself or my property howsoever caused arising out of my participation in the Event whatsoever when due to any negligent act, breach of duty, default and/or omission on the part of the Show Society and any person or body directly or indirectly associated with the Event, or otherwise.
3. I acknowledge that participating in the Event may involve a risk of serious injury or even death. I accept all risks necessarily flowing from participating in the Event.
4. I acknowledge that the Show Society relies on the information provided by me and state that all such information is accurate and complete.
5. I warrant that I am physically fit to participate in the Event and that I have not been advised otherwise by a qualified medical practitioner. I acknowledge that I must disclose any pre-existing medical or other condition that may affect the risk that either myself, or any other person will suffer injury, loss, or damage.
6. I consent to receiving any medical treatment including ambulance transportation that the Show Society and any person or body directly associated with the Event think desirable as required during the event.
7. I acknowledge that it is a condition of participating in the Event that I follow the instructions of the Show Society and any person or body directly or indirectly associated with the Event at all times. I indemnify and keep indemnified the Show Society and any person or body directly or indirectly associated with the Event from all claims, demands and proceedings arising out of or connected with a failure by me to comply with rules and/or directions given to me by the Show Society and any person or body directly or indirectly associated with the Event.
8. I declare that the horse/s in my care for the purposes of the Event have been in good health and not shown signs of any respiratory or other disease for at least five (5) days prior to the Event. I authorize any official connected with the Event to call for veterinary inspection of the horse/s in my care should they show signs of any respiratory illness and I agree to pay any fees associated with that veterinary inspection.
9. I declare that all horse equipment (tack, bridles, buckets, and any other articles that have come into contact with equines) and the horse transport vehicle have been cleaned and disinfected before leaving the property of origin to come to this event.

Signature: _____ Date: _____

Print name in full: _____ Phone: _____

Address: (Optional): _____

DECLARATION OF MINORS – UNDER 18 YEARS OF AGE

If you are under the age of 18 years on the Event Day, your parent or guardian must sign this declaration.

I certify that I am the parent/guardian of _____ who will be _____ years of age on the first day of the Event and that he/she has trained for and has my consent to participate in the Event. I testify that I have read the above and acknowledge acceptance of the stated conditions on behalf of the minor specified above.

In consideration of the facilities provided to us, I, myself, my executors, administrators and assigns and for the child/children/underage person/s (if applicable) absolutely release and discharge the Show Society and any person directly or indirectly associated with the Event from all claims, demands and proceedings arising out of or connected with participation if I or the child/children/underage person/s may suffer or sustain.

Signature of parent/guardian: _____

Print name in full: _____

I ACKNOWLEDGE THAT I HAVE READ THIS FORM OR THAT IT HAS BEEN EXPLAINED TO ME. I FULLY UNDERSTAND ITS TERMS AND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT. I HAVE SIGNED THE DOCUMENTS FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.



Queensland Ag Shows

Biosecurity Horse Health Declaration/Movement Record

Name of Event/Activity: Cloncurry & District Show Date: _____

OWNER OR PERSON IN CHARGE OF HORSE/S					
FULL NAME:					
HOME ADDRESS:					
POSTAL ADDRESS:					
EMAIL:					
PHONE:			MOBILE:		
PROPERTY OF ORIGIN OF HORSE/S					
FULL ADDRESS: (if different to above)					
PIC NUMBER: (Property Identification Code)					
Event PIC NUMBER: (Property Identification Code) QBCR0118					
Destination PIC NUMBER: (Property Identification Code) If not returning to original PIC nominated above					
DETAILS OF ALL HORSES BEING BROUGHT ONTO THE GROUNDS (USE ADDITIONAL SHEETS AS REQUIRED)					
CLASS NO.	REGISTERED NAME	SEX	MICROCHIP/BRAND	CURRENT HVV Yes/No	ENTRY FEE \$

ENTRY FEES MUST ACCOMPANY THIS FORM. ENCLOSED TOTAL: \$ _____

Are horses being stabled overnight at this event? YES NO

Declaration by owner or person in charge of horse/s attending:

I, _____ declare that the horse/s named above has/have been in good health, eating normally and not shown signs of illness during the last 3 days leading up to this event. I give my authorisation for the Event Organising Committee/Manager to call for veterinary inspection of the horse/s named above and in my care should they be showing signs of illness at any time during the course of the event. I agree to pay any veterinary fees incurred for the above mentioned horses as a result of this veterinary examination.

- I AGREE TO ENSURE THAT PRIOR TO ARRIVAL:**
- All horses will be shampooed, rinsed and allowed to dry, and their hooves will have been picked clean of all solid material and washed with shampoo.
 - All vehicles and equipment accompanying the animals will be cleaned to remove all solid material that could contain disease agents, and then disinfected.

- I FURTHER DECLARE THAT:**
- The information contained in this Biosecurity Declaration and Movement Record is true and correct to the best of my knowledge.
 - I agree to abide by all conditions that may be imposed at any time by the Event Organising Committee/Manager. I also agree to abide by and accept the regulations as printed in the schedule and make these entries subject to such regulations and rules of the committee.
 - I acknowledge that in failure to comply, I may be directed to leave and my nominations will be forfeited.
 - I acknowledge that decontamination and disinfection procedures may be required of me if instructed by the Event Organising Committee/Manager.
 - All horses described above are free of cattle ticks before entering the event.
 - I acknowledge that there is a possibility that horses might become infected with disease agents as a result of any movements and if necessary animals and premises will be placed on a restricted list in accordance with any Legislation covering such occurrences including policies and procedures in effect at that time. I agree and acknowledge that the Manager/Event Organising Committee, it's State or National Affiliated bodies and their members are not in any way liable for any cost, expense, loss, damage, claim, action, proceeding or other liability incurred by or made against me as a result of any movement of horses to the Event/Farm.

PLEASE COMPLETE THE CATTLE TICK RISK MINIMISATION REQUIREMENTS

State the cattle tick risk minimisation requirements that have been met for horse/s entering the Event/Activity

Horse/s are (Select One)	<input type="checkbox"/>	From Cattle Tick Free Area of Queensland or from interstate
	<input type="checkbox"/>	From Cattle Tick Infested Area of Queensland or from Infested Land and the Horse/s has been manually inspected and is tick free
	<input type="checkbox"/>	No cattle, deer, bison and buffalo on the property of origin, or Cattle, deer, bison and buffalo on the property of origin but horse/s isolated from other animals.
	<input type="checkbox"/>	From Cattle Tick Infested Area of Queensland or from Infested Land and the Horse/s has been manually inspected and is tick free and have received a Chemical treatment Treatment: _____ Method of Treatment: _____ Date: _____ (Chemical used) (Spray)
<input type="checkbox"/>	From Cattle Tick Infested Area of Queensland or from Infested Land and the Horse/s is stable and groomed and must: <ul style="list-style-type: none"> Be led and tractable Be manageable Have been groomed regularly (daily) for a period of 35 days At all times, be kept a minimum of 10 metres from the nearest cattle, deer, bison and buffalo. 	

Signature _____ Date _____

NOTE: It is recommended to keep a copy of this form by the owner or person in charge of horse/s and event committee for a minimum of 5 years.