#### CROWS NEST AGRICULTURAL HORTICULTURAL & INDUSTRIAL SOCIETY INC. ("the Show Society")

#### NAME OF EVENT: CROWS NEST ANNUAL SHOW

DATES/DURATION OF EVENT: 11<sup>th</sup> May 2024

#### Horse Event Participant - Waiver, Release and Acknowledgement Form

In this Waiver, Release and Acknowledgement Form "the Show Society" means and includes all affiliated entities; servants or agents of the Show Society, all employees of the 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:

- 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 of my heirs, successors, executors, personal representatives and assigns.
- 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 whether 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.

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.

- I acknowledge that the Show Society relies on the information provided by me and state that all such information is accurate and complete.
- 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.
- 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.

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.

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.

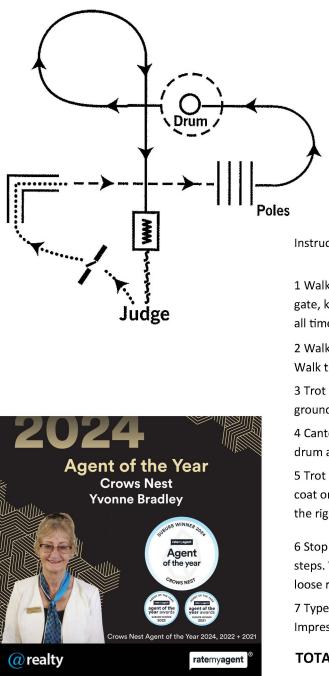
I declare that all horse equipment (tack, bridles, buckets and any other articles that have come into contact with equines) and the horse transport vehicle have been cleaned and disinfected before leaving the property of origin to come to this event.

Signature:	Date:	
Print name in full:	Phone:	
	(Op	tional)
Address:		
DECLARATION OF MINORS - UNDER 18 YEA	RS OF AGE	
If you are under the age of 18 years on the Event Day your pare	ent or guardian must sign this declarat	ion.
I certify that I am the parent/guardian of day of the	who will be	years of age on the
Event and that he/she has trained for and has my consent to pa and acknowledge acceptance of the stated conditions on beha	rticipate in the Event. I testify that I ha If of the minor specified above.	ave read the above
In consideration of the facilities provided to us, I myself, my exe under age person/s (if applicable) absolutely release and discha ed with the Event from all claims, demands and proceedings ar the child/children/under age person/s may suffer or sustain	cutors, administrators and assigns and rge the Show Society and any person c ising out of or connected with particip	for the child/children/ lirectly or indirectly associat- pation in the Event that I or
Signature of parent/guardian:	Date:	
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 17GREATEST EXTENT ALLOWED BY LAW.

The stock horse challenge is open to all riders and is not a locals only event Steward: Yvonne Bradley (0408 181 146) Entry Fee: \$5.00 Prize Money: TBA Nominations accepted at the ticket box on the day This age class will begin at 11am.

### The below events will be the components of the Stockman's Challenge



# **Utility Pattern** U1 @Realty Stock Horse Challenge

Pattern same for both encouragement & open classes, open to all age groups

> 3 4 5

(Under13 yrs,	13 & under 18yrs,
18 yrs & over,	Open )

10

			a		
	Insufficient	Satisfa	actory	Good	Excellent
structions			Possible points	Allocate points	d
Walk to gate and ate, keeping hand I times.			10 x 2 (20)		
Walk onto L sha /alk through	ped poles an	d	10		
Trot to and over round	4 poles on t	he	10		
Canter left lead rum and pick up	-		10		
Trot around dru pat on drum and ne right and strai	Canter circle	e to	10 x 2 (20)		
Stop in square a eps. Walk back t ose rein		3	10 x 2 (20)		
Type, Presentati npression	on and Over	all	10		
OTAL			100		

The stock horse challenge is open to all riders and is not a locals only event •Steward: Yvonne Bradley (0408 181 146)

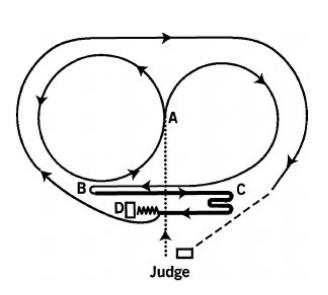
•Entry Fee: \$10.00

·Prize Money: TBA

·Nominations accepted at the ticket box on the day

•This age class will begin at 11am.

The below events will be the components of the Stockman's Challenge





Working Pattern - W11 @Realty Stock Horse Challenge 13 & under 18 18 years & over encouragement (Horse & Rider never won an open

DIRECTIONS	POSSBLE	ALLOCATED
	POINTS	POINTS
1 Walk out to A cracking whip	10	
2 Canter circle left	10	
3 At a simple change	10	
4 Canter three quarter circle to right and continue on to B. At B Stop and roll back left	10 x 2 (20)	
Hand Gallop to C and do 2 quick Haunch turns in either direction (as if working beast)	10 x 2 (20)	
6 Hand Gallop to D, Stop settle and Rein back 4 metres	10	
7 From D Canter on light rein around area to C. Trot back to Judge and stop	10	
8 Type, Presentation and Overall Impression	10	
TOTAL	100	

The stock horse challenge is open to all riders and is not a locals only event

·Steward: Yvonne Bradley (0408 181 146)

•Entry Fee: \$10.00

·Prize Money: TBA

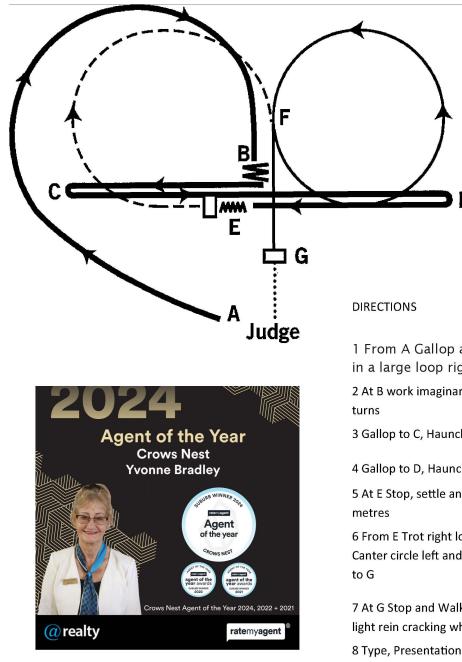
·Nominations accepted at the ticket box on the day

 $\cdot This$  age class will begin at 11am.

## The below events will be the components of the Stock horse Challenge

# Pattern Working W12

@Realty Stock Horse ChallengeOpen only, 18 years and over



DIRECTIONS	POSSIBLE POINTS	ALLOCATED POINTS
1 From A Gallop around to B in a large loop right	10	
2 At B work imaginart beast 4 turns	10	
3 Gallop to C, Haunch turn left	10 x 2 (20)	
4 Gallop to D, Haunch turn right	10 x 2 (20)	
5 At E Stop, settle and Rein back 5 metres	10 x 2 (20)	
6 From E Trot right loop to F. At F Canter circle left and continue on to G	10	
7 At G Stop and Walk to Judge on light rein cracking whip	10	
8 Type, Presentation and Overall Impression	10	
TOTAL	110	

The stock horse challenge is open to all riders and is not a locals only event

Steward: Yvonne Bradley (0408 181 146)

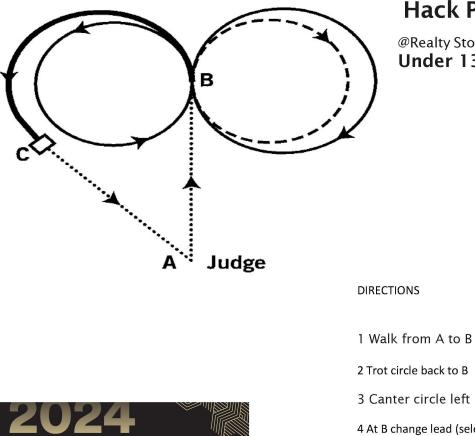
Entry Fee: \$5.00

Prize Money: TBA

Nominations accepted at the ticket box on the day

This age class will begin at 11am.

The below events will be the components of the Stock horse Challenge



Hack Pattern H1

@Realty Stock Horse Challenge
Under 13 years

POSSIBLE ALLOCATED

POINTS

10

2 Trot circle back to B	10
3 Canter circle left	10
4 At B change lead (select sim- ple or flying change)	10
5 Canter circle right	10
6 At B change lead ( alternate style to point 5)	10
7 Hand Gallop part circle left to C	10
8 At C halt facing Judge and settle	10
9 Walk back to judge on a light rein	10
10 Type, Presentation & Overall Impression	10
TOTAL	100

Crows Nest A

Agent of the Year Crows Nest

**Yvonne Bradley** 

Agent

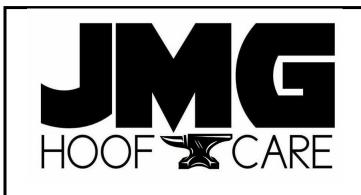
nt of the Year 2024, 2022 + 202

ratemyagent

We thank the following sponsors of the Stock man's challenge...



16 William Street Crows Nest 4698 2520 Email crowsnest@secvets.com.au



Horse shoeing and trimming

# Justin Grosskopf

0428 3111 69





Attention Horse Competitors:

You must...

Complete a

HORSE DECLARATION & MOVEMENT FORM

(prior to entering the Crows Nest Showgrounds, a **TICK FREE VENUE**)

- Submit SIGNED HORSE PARTICIPANT WAIVER at the Horse Ticket Office
- ENTRIES to be received at the Horse Ticket Office on Show Day
- ALL OTHER RULES AND REGULATIONS CONTAINED IN THE SCHEDULE MUST BE COMPLIED WITH.



#### Biosecurity Horse Health Declaration

EVENT NAME						
ARRIVAL DATE				DEPARTURE DATE		
ARE THE HORSES LISTED BELOW STAYING ON	SITE FOR T	HE DURATION	OF THE EVENT?		Yes / No	
IF NOT STAYING ONSITE, ARE THE HORSES RE NEED TO COMPLETE A NEW HHD FOR EACH D			THE PIC LISTED BE	LOW? IF NO, YOU WILL	Yes / No	
COMPETITOR'S NAME						
OWNER/ PERSON IN CHARGE OF HORSE/S						
HOME ADDRESS						
					POSTCODE	
PHONE (MOBILE)			EMAJL			
VEHCILE REGISTRATION NUMBER						
PROPERTY OF ORIGIN OF HORSE/S						
FULL ADDRESS (if different from above)						
					POSTCODE	
PIC NUMBER (Property Identification Code)	Q					
ARE YOU CROSSING ANY TICK LINES TO ATTEND THIS EVENT?	YES / NO	TO EN	WHAT MEASURE SURE TICKS ARE I SS THESE LINES?	ES HAVE YOU TAKEN		
DETAILS OF ALL HORSES YOU ARE BRINGING	ONTO THE	GROUNDS				
# HORSE'S REGISTERED NAME		SEX	MICROCHIP/BR	AND	PIC OF PROPERTY HO IS RETURNING TO (II DIFFERENT FROM ABO	F HENDRA VIRUS
1					۹	8 8
2	6		2			

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 five days leading. up to this event. I give my authorisation for the Event Organising Committee/Biosecurity 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 abovementioned horses as a result of this veterinary examination. I agree that should my horse at any time become sick at the event I will advise the event organisers immediately.

I AGREE TO ENSURE THAT:

1.All horses, vehicles and equipment accompanying horse/s will be clean and free of solid material (that could contain disease agents) prior to departing property of origin.

I FURTHER DECLARE THAT:

 The information contained in this Biosecurity Declaration is true and correct to the best of my knowledge.
 I agree to abide and those people that are assisting me on the day, by all conditions that may be imposed at any time by the Event Organising. Committee/Biosecurity Manager.

4. I acknowledge that in failure to comply, or those people that are assisting me on the day fail to comply, may be directed to leave the event and my nominations will be forfeited.

5. I acknowledge that decontamination and disinfection procedures may be required of me if instructed by the Event Organising Committee/ **Biosecurity Manager.** 

6. I acknowledge that there is a possibility that horses might become infected with disease agents as a result of any movements and if necessary horses and premises will be quarantined in accordance with any legislation covering such occurrences including policies and procedures in effect at that time. I agree and acknowledge that the Biosecurity Manager/Event Organising Committee, its 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.

(Signature)		(Name)	// (	(Date)
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**Biosecurity Horse Health Declaration** 

#### HORSE LISTING CONTINUED

	TAILS OF ALL HORSES YOU ARE BRINK	DESCRIPTION	MICROCHIP/BRAND	PIC OF PROPERTY	CURRENT
*	REGISTERED NAME	/ SEX	MICROCHIP/BRAND	HORSE IS RETURNING TO (IF DIFFERENT FROM ABOVE)	HENDRA VIRUS VACCINATION Yes/No
3				Q	
4					
3					
6					
7					
8					
9					
10					
11					
12					5
13					12
14					

Declaration by owner or person in charge of horse/s attending: I declare that the information on page 1 of this Horse Health Declaration is true and correct to the best of my knowledge for the horses listed above.

\_\_\_\_\_(Herre) \_\_\_\_\_(Herre) \_\_\_\_ \_\_\_ \_

/ / (Date)