



Southern Districts Working Equitation Club Inc.

Magenup Equestrian Centre, 302 De Haer Road, WANDI, WA, 6167

Email: sdwe.club@gmail.com

Membership Pack

1 January 2021 to 31 December 2021

To our existing members welcome back to another exciting year of WE. The committee look forward to seeing you and your equine partner grow and develop in the coming year. To all our new members, a very warm welcome and please feel free to contact any of the committee, listed below, who will be more than happy to meet you at rallies, show you around and introduce you to other members.

Current Committee Members

President	Crissy Coletta
Vice President	Sarah Adams
Secretary:	Jenny Le Messurier
Treasurer	Sonia Hogermeer
Committee	Lisa McDonald
	Samantha Soltoggio
	Sheryl Elliott
	Judi John
	Jane Lovatt

Committee is current until the AGM November 2021.

Your Club Rules

In addition to the Magenup Management Committee guidelines, the rules listed below apply to annual and visiting members of the SDWE Inc., when using the Magenup Equestrian Centre:

1. Members will be respectful and courteous to all people and riders on the grounds at all times.
2. All riders are advised to carry on them, or provide to the Committee, information on current medical conditions (e.g. allergies, epilepsy, asthma) which could affect emergency treatment in the event of an accident. All riders/members/coaches will be asked to complete a 'personal information card' which will be stored in the clubrooms for easy access if required.
3. Each individual rider is responsible for the safety of his/her saddlery. Acceptable tack will be in accordance with the Australian National Working Equitation Ltd (ANWEL) Rule Book.
4. Approved helmets, complying with current safety standards, are compulsory for all ridden activities.
5. An incident book will be kept in which all incidents and accidents will be recorded, along with the names and addresses of any witness.
6. Horses will be treated with respect and kindness at all times.
7. Stallions/colts/rigs are permitted providing:
 - a. They are kept in secure yards/bays.
 - b. They wear a green tag on bridle or saddlecloth to identify as an entire male horse.
 - c. The owner/rider/handler takes responsibility to ensure that all possible safety precautions are taken and to inform organisers that they have a stallion/colt/rig on the grounds.
8. Yards, bays and carpark are to be cleaned of all manure and hay and placed in brick bin provided.
9. Only emergency vehicles are to be driven on the grassed areas around the clubrooms or on the bank.



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Email: sdwe.club@gmail.com

Family Name: _____ First Name: _____

Address: _____

Phone: _____ Email: _____

Emergency Contact Name: _____ Phone: _____

Health: list any relevant medical or physical conditions: _____

Riding experience/level: _____

Details of main ridden horse (*Horse must be 4yrs and over*)

Name: _____ Gender: _____ Age: _____

Experience level of horse, i.e. green, schoolmaster: _____

Do you have EWA Membership - EWA Category _____ Member No. _____

ANWE Rider Levy Number: _____

****It is compulsory for all riders to hold an ANWE Rider Levy Number (cost \$25.00 per year) to attend Rallies and Compete in Protocol days and Competitions with any WE club. You need to apply for this through Nominate please go to <https://anwewa.com/membership/> for full information and a How to Video.***

Every member is encouraged to help with at least one event per year. What skills or area are you able to contribute towards helping your club? _____

Membership Type (*please tick appropriate box*)

Adult Yr	\$150.00	Adult ½ Year	\$100.00
Non Rider	\$10.00	Junior (13 yrs over)	\$150.00

Payment Methods:

Direct deposit to Southern Districts Working Equitation Club Inc. BSB: 633-000 Acc #: 163 868 862

Please use your SURNAME and MSHIP as bank reference (SMITH MSHIP) email proof of payment with the membership form, – Attn Secretary - sdwe.club@gmail.com

***Please note: membership application will only be valid once both the membership form and payment is received. Your membership application will be assessed by the Committee in accordance with the Club's Constitution.**

As a member of SDWE, I understand that I am a member of an ANWE Ltd affiliated club which abides by the Laws and Regulation, Policies, Rules and Guidelines of ANWE Ltd. I understand that I can access these rules, guidelines and policies on the ANWE website at <http://anweltd.com.au>.

INSURANCE: Please note that the club's insurance does not cover riders for personal accident or public liability. You are strongly advised to insure yourself. In the event of an accident, the club reserves the right to call an ambulance, if necessary, at the expense of the injured rider.

Signed: _____ Date: _____



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Junior Riders Parental Permission

Parent/Guardian for under 18-year-old members:

I agree that my child will abide by the rule that govern SDWE and that I will be in attendance at all times.

Name _____

Address _____ Phone _____

Signature _____ Date _____

Visual Images Release Form – *please complete*

From time to time the Southern Districts Working Equitation Club Inc (SDWE) creates promotional material to create awareness in the community of rallies and events connected with our club.

We ask you to sign this form to indicate you fully understand and authorise SDWE, its agents and affiliates to use photographs or visual images of you/your child to promote the sport. The images could be used in marketing and advocacy materials including, but not limited to, posters, brochures, website, newsletters, reports and media stories.

In signing below, you will be giving permission for SDWE to use the images in the promotion of the Club and its activities between the dates of 1st January 2020 and 31December 2020.

Thank you for agreeing to be part of SDWE promotions.

I hereby give SDWE permission to utilise photographic and/or visual images in promotional resources for the purposes outlined above for the next 12 months.

I am aware my image will be used to promote SDWE programs and may be displayed on its website and on other promotional material.

I waive the right to inspect or approve the finished photograph or visual image and any written copy or printed material that may be created in connection with the photograph or visual image. I also waive any interest or right to compensation I have in the photograph or visual image.

I understand that although SDWE will endeavor to ensure accuracy, SDWE cannot be held responsible for any use or misuse of the images once released. I release SDWE from any liability in relation to the misuse of images once released.

(Name and signature of each member listed above or parent /guardian if under 18yrs)

_____ (Name) _____ (Signature)

_____ (Date)

RISK WARNING, RELEASE & WAIVER OF LIABILITY – SOUTHERN DISTRICTS WORKING EQUITATION CLUB

EQUESTRIAN WESTERN AUSTRALIA INC. ("EWA") RELEASE AND WAIVER OF LIABILITY

Used with permission by Southern Districts Working Equitation Club (SDWE), Inc, for SDWE rallies, events, coaches, members and guests.

ACKNOWLEDGEMENTS

I acknowledge and agree that:

- a) taking part in horse sports is a dangerous activity and serious INJURY or DEATH may result from participating in horse-related competitions or activities;
- b) horses may act in a sudden and unpredictable manner, and EWA and SDWE does not make any representations or warranties as to how a horse may act; and
- c) I participate in any event held or managed by EWA and SDWE, or coaching services provided by EWA or SDWE or a member coach of EWA (Activities), at my OWN RISK.

I have read, understood and agree to abide by this Waiver and Release of Liability, all and any rules, regulations, policies and codes (including the Code of Conduct) of EWA, and any organiser or manager of Activities, as may be in force from time to time, and acknowledge and agree that:

- a) EWA's publication of any amended rules, regulations, policies and codes shall be deemed to be sufficient notice to me of the current rules, regulations, policies and codes of EWA; and
- b) any misconduct (as determined by EWA or the relevant Activities organiser, in their sole discretion) or refusal by me to follow any direction of EWA or an Activities organiser, may result in my immediate disqualification from the Activities and the forfeiting of all fees paid in relation to those Activities.

RELEASE AND WAIVER

To the maximum extent permitted by law:

- a) I waive all legal and equitable rights of action against EWA and SDWE, including its officials, volunteers, medical personnel, members, employees, sponsors, promoters, advertisers, owners and lessees of premises on which Activities are held, underwriters, consultants and coaches (Associates), in regard to any claim arising from Activities, whatsoever or howsoever arising, and
- b) I fully release and hold harmless EWA and SDWE and each of its Associates for all and any loss, damages, injury, claim or death whatsoever or howsoever arising out of or in relation to the Activities.

I represent and warrant that:

- a) in the event I feel unsafe or unwell in any way, I will immediately advise EWA and SDWE and the relevant Associates and will immediately cease to participate in the Activities;
- b) I assume full responsibility and liability for any risk of bodily injury, death or property damage arising from participating in the Activities, whatsoever or howsoever arising; c. if I have any queries about this Waiver and Release of Liability, I have discussed those queries with EWA or SDWE, or otherwise sought my own legal advice and satisfied myself as to those queries;
- c) I understand that my signature to this document constitutes a complete and unconditional release of EWA and its Associates and SDWE from all liability to the maximum extent allowed by law in the event of me and/or the minor(s) or children under my care, suffering injury or death, or any of my property
- d) (including horses) suffering damage, injury or death; and
- e) I have explained the contents of this Waiver and Release of Liability to the minor(s) or children under my care, who have in turn confirmed to me their understanding of the terms and effect of this Waiver and Release of Liability.

NAME (BLOCK LETTERS)

DATE OF BIRTH

SIGN HERE

DATE