



## Agreement for Persons Responsible for a Horse

### PERSON RESPONSIBLE FOR A HORSE AGREEMENT

To complete if applying for membership as a **Person Responsible for a Horse** i.e. a parent/guardian/caregiver, horse owner, coach, or Senior Official.

I acknowledge I am the Person Responsible for a Horse at the (Name of Event/Activity)

for \_\_\_\_\_ who is **under 18 years of age**.

I also acknowledge that I am responsible for ensuring the fitness of any such horse to participate in the above Event/Activity, and for any act performed to such horse while present at the venue where the above Event/Activity is held.

I agree to the Branch, Club, Area and NZPCA (located at PO Box 7537, Taradale, Napier, 4141) collecting, holding, using and disclosing my personal information as provided on this form (and any updated or additional personal information obtained from me) for the purposes of processing my application for membership, putting my name and contact information on membership lists, providing me with information about other Pony Club Events and Activities, and any other purpose I agree to in writing.

I understand that my personal information will be held securely by the Branch, Club, Area and NZPCA, that I will have access to it and that it will be corrected upon request from me under the Privacy Act 1993.

I will not hold the Branch, Club, Area or NZPCA or their respective officers responsible for any claims, losses, expenses and costs (including legal costs) which may arise from or in connection with my membership in the above Event/Activity except in the case of gross negligence or a wilful act or omission on the part of the Branch, Club, Area or NZPCA.

I indemnify the Branch, Club, Area or NZPCA from all claims, losses and expenses (including legal costs) suffered or incurred at any time as a result of, or resulting directly or indirectly from, my failure to observe the constitutions, regulations, policies, manuals, guidelines and reasonable directions of the Branch, Club, Area or NZPCA respectively.

I also understand and acknowledge that as a Person Responsible for a Horse I become a Member of the Branch, Club, Area and NZPCA and I agree to be bound by the Branch, Club, Area and NZPCA Constitution, Regulations, and Policies while the Member participates in the above Event/Activity.

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

Surname: \_\_\_\_\_ First names: \_\_\_\_\_

Address: \_\_\_\_\_

Post Code: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Mobile: \_\_\_\_\_

### NZPCA USE ONLY

Signed NZPCA Officer: \_\_\_\_\_ Date: \_\_\_\_\_

*Note: All definitions in this document have the same meaning as set out in the NZPCA Membership Regulation.*