



Western District Campdraft Association Inc

Beginner's Clinic 2017/18

(Re-scheduled)

3rd-4th February 2018

@WDCA Grounds, Macarthur

Registration Form

Participant Details

Name: DOB (under 21yo):

Postal Address:

Phone: Email:

Horse and Rider Campdraft Experience

Please indicate your experience:

- I have never competed
- I have only competed once or twice
- I compete regularly

Please indicate your horse's experience:

- Green horse/never competed
- Has campdrafted
- Other relevant experience:

SCA Membership

2017/2018 SCA Membership Number:

If you do not have a current SCA Membership you will need to purchase a full or weekend SCA Membership. The membership must be paid for separately and will be available on Friday evening or Saturday morning before commencement of the clinic. (Full Membership: Adult \$125, Juvenile \$30, Junior \$25. Weekend Membership: \$70)

Clinic Cost

Includes the clinic, morning and afternoon teas, Saturday and Sunday lunches, and Sunday breakfast. Participants are requested to bring a morning/afternoon tea share plate.

Non-participants may also join in for meals – please include numbers and payment with registration.

<input type="checkbox"/>	Adult (17yo+): \$225
<input type="checkbox"/>	Juvenile (13yo – under 17yo): \$100
<input type="checkbox"/>	Junior (8yo – under 13yo): \$75 (Parent or adult carer required to be present)
<input type="checkbox"/>	Meals for non-participant Adult/Juvenile (if required): \$50
<input type="checkbox"/>	Meals for non-participant Junior (if required): \$25

Note: A barbeque and salad meal will be available Saturday night at cost.

Payment (cheques payable to Western District Campdraft Association Inc or EFT)

Please complete this form and return it with full payment to:

Daryl Roe or ddportfairy@gmail.com
8 Powling St, (include EFT payment confirmation to
Port Fairy, Vic 3284 BSB 063 660 Acc. 1007 0834, reference *Your Name*)

Note: Clinic entries are limited in number. Entries will be taken on a first come basis and will only be confirmed once full payment is received.

Release and Waiver of Liability

I acknowledge that the recreational activity of campdrafting is a dangerous activity and involves a significant risk of physical harm. I acknowledge that I have been warned that if I participate in this activity that I may suffer injury, loss, damage or even death.

Participant's Signature:on this.....day of.....2017.

Parent's or Guardian's Signature (#):on this.....day
of.....2017.

If under 18 years of age a Parent or Guardian must sign.