Boonah Show Society Inc.
ABN: 64 377 030 073
Physical: 12 Melbourne Street, Boonah Qld 4310
Postal: P.O. Box 1, Boonah Qld 4310
P: 07 5463 1124
E: secretary@boonahshowsociety.org.au
W: www.boonahshowsociety.org.au

BOONAH SHOW SOCIETY
EST. 1898
TEVIOT PARK

Boonah Show Society

Horse Riding Participation, Release & Acknowledgement Waiver

This document is a risk warning and waiver of liability for participants involved in horse riding and equestrian-related activities conducted at Boonah Show Society grounds or events.

Participant Details

Full Name: _____

Date of Birth: _____

Address: _____

Email: _____

Phone: _____

Acknowledgement of Risk

I acknowledge that horse riding and equestrian activities are dangerous recreational activities and involve inherent risks. Horses are unpredictable and may act suddenly, including bucking, kicking, biting, bolting, or reacting to noise, crowds, weather, equipment, or other animals. Participation may result in serious injury, illness, property damage, or death.

I understand that risks may arise from, but are not limited to: falls, collisions, equipment failure, surface conditions, weather extremes, actions of other riders or horses, and proximity to spectators or vehicles.

Assumption of Risk & Release of Liability

I voluntarily accept and assume all risks associated with my participation in horse riding and equestrian activities. To the fullest extent permitted by law, I release and hold harmless Boonah Show Society Inc., its committee members, officers, employees, volunteers, contractors, landowners, and affiliates from any liability, claims, demands, costs, or actions arising from my participation.

Participant Responsibilities

I agree to follow all instructions, rules, and safety requirements set by Boonah Show Society and event officials. I confirm that I am physically fit to participate, will wear appropriate protective equipment, and will not participate under the influence of alcohol or illicit drugs.

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Governing Law

This waiver is governed by the laws of Queensland and the Commonwealth of Australia, including the Civil Liability Act 2003 (QLD).

Signature (Participants 18 Years and Over)

Participant Signature: _____ Date: _____

For Participants Under 18 Years of Age

Child's Name: _____

Date of Birth: _____

Parent/Guardian Name: _____

I am the parent or legal guardian of the above-named participant and consent to their participation in horse riding and equestrian activities at Boonah Show Society. I acknowledge and accept the risks outlined in this waiver on their behalf.

Parent/Guardian Signature: _____ Date: _____