

POLOCROSSE ASSOCIATION OF AUSTRALIA IN (PAA) REGISTRATION APPLICATION & DECLARATION

I[insert name]

Of..... [insert address]

hereby apply for registration as a player with the Polocrosse Association of Australia. In consideration of my application for registration being accepted I **acknowledge and agree** that:

1. In this registration declaration:

"**Claim**" means and includes any action, suit, proceeding, claim, demand, damage, penalty, cost or expense however arising including but not limited to negligence BUT does NOT include a claim against PAA by any person entitled to make a claim under a relevant PAA insurance policy or under the PAA Constitution or PAA Regulations.

"**PAA**" means Polocrosse Association of Australia Inc .

"**PAA Activities**" means performing or participating in any capacity in any authorised or recognised PAA activity, including but not limited to polocrosse training or competitions sanctioned or approved by a club, state or national organization, polocrosse tournaments and any other polocrosse event or activity including social events.

"**PAA Organisations**" means and includes PAA, its subsidiaries, its members (including affiliated state and territory associations, sub-associations and clubs) and their respective directors, officers, members, servants or agents.

2. **If my application for registration is accepted I will be a member of**

.....[Insert Club] Club,

.....[insert State] State

Association & PAA. I acknowledge my application will be deemed to be accepted upon my participation in PAA Activities and I acknowledge that I will be bound by and agree to comply with the constitutions, regulations and policies of the PAA Organisations. These rules are necessary and reasonable for promoting PAA and the sport of polocrosse.

3. **Warning:** PAA Activities can be inherently dangerous. I acknowledge that I am exposed to certain risks during PAA Activities including but not limited to physical exertion, contact with animals and equipment, body contact, venue and weather conditions. I acknowledge that my horse will be exposed to the same inherent risks during PAA Activities. I acknowledge that accidents can and often do happen which may result in me or my horse being injured or even killed, or my property being damaged. I have read and understood this warning and voluntarily accept and assume the inherent risks in participating in PAA Activities.

4. **Exclusion of implied terms:** I acknowledge that where I am a consumer of recreational services, as defined by any relevant law, certain terms and rights usually implied into a contract for the supply of goods and services may be excluded. I acknowledge that these implied terms and rights and any liability of the PAA Organisations (or any of them) flowing from them, are expressly excluded to the extent possible by law, by this registration declaration. To the extent of any liability arising, the liability of the PAA Organisations will, at the discretion of the relevant PAA Organisation, be limited to the resupply of the services or the payment of the cost of having the services supplied again.

5. **Release & Indemnity:** In consideration of PAA accepting my application for registration I:

(a) release and will release the PAA Organisations from all Claims that I may have or may have had but for this release arising from or in connection with my registration and/or participation in any PAA Activity; and

(b) indemnify and will keep indemnified the PAA Organisations to the extent permitted by law in respect of any Claim by any person arising as a result of or in connection with my registration and/or participation in any PAA Activity.

6. **Fitness to Participate:** I declare that I am mentally, medically and physically fit and able to participate in any PAA Activity. I am not and must not be a danger to myself or to the health and safety of others. I will immediately notify PAA in writing through my Club of any change to my medical condition, fitness and ability to participate. I acknowledge that if I consume alcohol or drugs I may be deemed to no longer be fit to participate in PAA Activities and may be prevented from doing so.

7. **Privacy:** I understand that the information that I have provided is necessary for the Objects of the PAA Organisations. I acknowledge and agree that the information will be disclosed to my Club and State Association and will only be used for the Objects of the PAA Organisations and to provide me with registration services. I understand that I will be able to access my information through my Club. If the information is not provided my registration application may be rejected. I acknowledge that the PAA Organisations may also use my personal information for the purposes of providing me with promotional material from PAA Organisation sponsors or third parties. I may advise my State Association if I do not wish to receive from the PAA Organisations, any sponsor or third party material.
8. **I have provided the information required and signed this form.** I warrant that all information provided is true and correct. I acknowledge that this registration declaration cannot be amended. If I do amend it my application will be null and void and cannot be accepted by PAA.
9. **Severance:** If any provision of this registration declaration is invalid or unenforceable in any jurisdiction, the phrase or clause is to be read down for the purpose of that jurisdiction, if possible, so as to be valid and enforceable. If the phrase or clause cannot be so read down it will be severed to the extent of the invalidity or unenforceability of it in any other jurisdiction. Such severance does not affect the remaining provisions of this registration declaration or affect the validity or enforceability of it in any other jurisdiction.

I authorise the Polocrosse Association of Australia (including its State Associations) to use photographs or videos of me for promotional purposes in any type of media, including its website. The photographs, videos may not be used for profit without my express permission.

Authorisation not given. *(if box is not ticked authorisation is given)*

I have read, understood, acknowledge and agree to the above declaration including the warning, exclusion of liability, release & indemnity. I acknowledge that if my application for registration is successful I will be entitled to all benefits, advantages, privileges and services of PAA registration and will be subject to the PAA rules, regulations, by-laws and disciplinary actions and procedures, including the PAA Anti Doping Policy, as currently in force and as may be amended from time to time.

Signed: Date:

Name:

Where the applicant is under 18 years of age this form must also be signed by the applicant's parent or legal guardian.

I, **am the parent or guardian** of the applicant. I authorise and consent to the applicant undertaking the PAA Activities. In consideration of the applicant's registration being accepted I expressly agree to be responsible for the applicant's behaviour and agree to personally accept in my capacity as parent or guardian the terms set out in this registration application and declaration including the provision by me of a release and indemnity in the terms set out above. In addition I agree to be bound by and to comply with the PAA constitution and any regulations and policies made under it, including the PAA Anti Doping Policy, as currently in force and as may be amended from time to time.

Parent's signature:

.....

Date: Name:
(where applicant under 18 years old)