

Equitana Melbourne 2022 – Carriage Driving Expression of Interest

Please complete expression of interest form and email to peter.harkness1@bigpond.com by 16th September 2022.

Driver's Name:

Address:

ACDS Club (full name): Membership No.

Email: Phone Mobile

Groom Names:

Banking details (BSB no

& Account no

Horse/s' Details:

Name / Stage Name	Height	Age	Description (Breed/Colour)

Type of carriage:

Type of harness:

How long have you been driving?

Why do you want to drive at Equitana?

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Provide details of driving experience.

The ACDS VB sub-committee will take this into account when considering your expression of interest.

Date	Location	Details of Competition, Result and Experience

Any other information we should consider.

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ACDS Victorian Branch Horse Event Participation Declaration

EVENT: Equitana 2022
Melbourne Show Grounds
Date: 13 November 2022

Details of Owner/Person in charge of horse/s:

Name: _____

Address: _____

Phone No: _____ Mobile: _____ ACDS Membership No: _____

	Full Name of Horse/Pony	Identification colour/markings/brand or ACDS Registration Number	Microchip Number	Current Hendra Vaccination (Yes or no)
1				
2				
3				
4				
5				
6				

Address of property from which the horse/s has/have moved to this event:

1
2
3
4
5

Are any of these properties considered to be in a Hendra 'hotspot'? Yes No

Address of property to which the horse/s will move to after this event:

1
2
3
4
5

Health of Horse/s:

I, _____ declare that the horse/s named above has/have been in good health, eating normally and not showing signs of any disease during the last 3 days leading up to this event entry closing.** I give my authorisation to call for a veterinary inspection of the horse/s named above, and in my care, should they be showing signs of any illness at any time during the course of this event. I agree to pay any veterinary fees incurred as a result of this, and any ensuing veterinary examination. In addition, I agree to be responsible for any costs incurred by me, or my horse/s in the event of a lockdown.

** If my horse/s do not remain healthy between event entry closing date and the event itself, I agree **not to attend**.

Signed: _____ Date: _____

Any person causing a claim to be made against the Australian Carriage Driving Society Inc. (ACDS) Insurance Policy is personally liable for the excess amount in full as determined by the Insurance Policy at the time of the incident. I agree to abide by and adhere to the Rules and by-laws of the ACDS. In addition, I confirm that driver and groom/s associated with this entry will wear only helmets that comply with the current ACDS requirements.