



NATIONAL RODEO ASSOCIATION

CAN: 058 447 993

ABN: 36 058 447 993

Street Address: Corner of Tuckaroo Drive and Beerburrum Road, Caboolture QLD 4510

Postal Address: PO Box 1477, Caboolture QLD 4510

DAY MEMBERSHIP NOMINATION FORM

Requirements: All fields on these forms must be completed for your nomination to be accepted. Email your completed form as a PDF document to entries@nationalrodeoassociation.com.au. You will receive a response email confirming whether your nomination has been accepted or declined. Accepted nominations will be issued a reference number. Unaccepted nominations will include a reason. Nominations must be paid by 12:00pm Monday or they will be cancelled. If you have not received a response by the close of central entries, please confirm that your email was sent correctly and contact the NRA Office before entries close to confirm receipt. It is your responsibility to ensure all requirements are completed.

Events: Select the event(s) you wish to nominate for by marking the corresponding box. Only events advertised for the rodeo you are nominating for may be selected. If an advertised event is not listed below, please include it in the blank spaces provided. All available events and their entry fees are advertised on the NRA website for each rodeo. Junior competitors nominating for a senior event will be required to pay the senior day membership fee.

RODEO NAME: _____ RODEO DATE: ____/____/____

Senior Events	X	Entry Fee
Men's Bull Ride		
Men's Saddle Ride		
Men's Bareback Ride		
Men's Rope & Tie		
Men's Steer Wrestling		
Team Roping		
Ladies Barrel Race		
Ladies Breakaway Roping		
Ladies Steer Undecorating		
Senior Men's Bull Ride		
Novice Men's Bull Ride		
Novice Men's Saddle Ride		
Novice Men's Bareback Ride		
Novice Men's Horse Ride		
Novice Barrel Race		
Junior Events	X	Entry Fee
U18 Junior Barrel Race		
U18 Junior Breakaway Roping		
U18 Boy's Junior Bull Ride		
U15 Mini Bull Ride		
U15 Junior Steer Ride		
7-U12 Mini Bull Ride		
7-U12 Poddy Ride		
Day Membership	X	Fee
Senior Day Membership		\$15.00
Junior Day Membership		\$3.00
TOTAL NOMINATION FEE	\$	

BANK DETAILS:

Provide your bank details below for prizemoney payouts.

Account Name: _____

BSB Number: _____

Account Number: _____

PAYMENT METHOD:

Indicate your payment method for nominations by marking the corresponding box and following the directions.

☐ **Option 1 – Card Payment** (note: 2% surcharge applies)

Name on Card: _____

Card Number: _____

Expiry: _____ CVV: _____

Card payments are processed at 12:00pm Monday. You must ensure sufficient funds are available to provide payment.

☐ **Option 2 – Direct Deposit Payment**

The payment reference must include your surname and reference number when issued by central entries. Deposits must be transferred by 12:00pm Friday to ensure they are received by the 12:00pm Monday deadline. Payment must include the event entry fee(s) and day membership fee; central entries will advise the total nomination fee.

Account Name: National Rodeo Association Ltd.

BSB Number: 034 640

Account Number: 285 150

NRA Office:

Monday – Friday 9:00am – 3:00pm

Phone: 07 5495 8668

Fax: 07 5495 7384

Email: office@nationalrodeoassociation.com.au

Central Entries:

Wednesday 10:00am – 2:00pm

Thursday 2:00pm – 6:00pm

Phone: 07 5499 1700

Email: entries@nationalrodeoassociation.com.au

SELECT EVENT(S) MARKING THE CORRESPONDING BOX



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IMPORTANT NOTICE FOR COMPETITORS - YOU MUST READ THIS CAREFULLY

Rodeo is a dangerous sport, and individuals may get injured in the course of their participation. The Association has put in place Rules and Policies for competition, which are designed to protect the competitors and address issues of animal welfare. However, accidents can happen, and individuals may get injured. While the Association has put in place a list of benefits, which are set out, more particularly below, those benefits are not taken as any form of indemnity and the Association requires that you provide a waiver of your rights in consideration of the matters that are set out below. In requiring this waiver, the Association does so in the interest of the sport of rodeo and the continued operations of that sport in the future and the welfare and interests of its competing members.

WAIVER ACKNOWLEDGEMENT AND INDEMNITY

I, **(insert competitors name)** agree to be bound by the Constitution of the Association and in the event that I intend to be an active competitor in rodeos conducted by the authority or auspices of the Association acknowledge that I am aware that the sport of rodeo does by its nature have inherent risks of personal injury to its participants.

In consideration of the benefits which are available to me (or on my behalf) by the Association (through its Accident Fidelity Fund/Personal Accident Insurance ("the fund"), the schedule of benefits I have read, acknowledged and accepted as being reasonable compensation) do hereby acknowledge and assume any risk of personal injury or death and in the event of such injury or death waive any claim which may be made by myself for or on behalf of myself, for such personal injuries or death arising out of my competing in the sport of rodeo, which I (or someone on my behalf) may have against the Association or any person or corporation operating under the auspices and authority of the Association.

Further, for the considerations set out above I indemnify and agree to keep indemnified in the future, the Association and its associates against all liability arising as a result of my negligence (or the negligence of my servants or agents) in respect of any death, bodily injury, disability, damage (including personal and property damage) occurring as a result of such negligence to the fullest extent permitted by law but only to the extent that the Association and its associates are not already indemnified or insured. I am aware that this is a legal document and that I have had the opportunity of seeking independent legal advice in relation thereto. In the light of that advice (or a waiver of the same on my behalf) I confirm that I have signed this *Day Membership Nomination Form* of my own free will accepting as I do the risks in providing the waiver that I have in the terms mentioned above particularly (having regard to the consideration passing between me and the Association). I enclose the payment of the requisite membership fee, which payment is made in consideration of my being granted membership of the Association and competing in the sport of rodeo under the authority and/or auspices of the Association.

I acknowledge that payment of day membership binds all day members to abide by the Constitution, Policies and Rules of this Association and the Code of Practice of the sport of rodeo.

EVENT AND CONTACT DETAILS

RODEO: _____ RODEO DATE: ____/____/____
ADDRESS OF COMPETITOR: _____
PHONE NUMBER: _____ D.O.B: ____/____/____
EMAIL ADDRESS: _____
NAME OF EMERGENCY CONTACT: _____
EMERGENCY CONTACT PHONE NUMBER: _____

SIGN

COMPETITOR SIGNATURE: _____ DATE: ____/____/____
NAME OF WITNESS: _____ WITNESS SIGNATURE: _____

U18 APPLICABLE

THIS SECTION IS ONLY REQUIRED IF THE COMPETITOR IS UNDER 18 YEARS OF AGE.

NAME OF PARENT/LEGAL GUARDIAN: _____
SIGNATURE OF PARENT/LEGAL GUARDIAN: _____
NAME OF WITNESS: _____ WITNESS SIGNATURE: _____

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www.nationalrodeoassociation.com.au

ALL FIELDS MUST BE COMPLETED AND SIGNED CORRECTLY