



**PCANT NON-MEMBER PUBLIC LIABILITY
INSURANCE
DAY ATTENDANCE FORM**

Name:

Address:

Post Code:

Date of Birth (If under 25yrs):

Horses Name:

Event / Activity:

Address of Event / Activity:

Date of Event /Activity:

Fee \$10.00

Paid Yes / No

Day attendance entitles cover under the Pony Club Public Liability Policy ONLY. This means if you cause property damage and/ or bodily injury to a third party whilst at the Pony Club Event, and the third party sues you for damages, the Pony Club Insurer will protect your interests in this matter, subject to the Policy Terms, Conditions and Exclusions.

*** I agree to abide by PCANT rules, policies and codes whilst at a Pony Club function.**

Signed: Date:

Club Holding Event:

Coordinator / Secretary:

Coordinator / Secretary Signature:

Fees to be collected, receipted and placed in Club account for administration costs.
This form should be completed and returned to PCANT on or near the next working day.
Forms to be completed for each day of competition if more than 1 day.