



**ONE ACTIVITY MEMBERSHIP**  
**AUSTRALIAN CARRIAGE DRIVING SOCIETY INC**  
**ABN 28 794 114 302**

**FORM**  
**C**  
**2017-2018**  
 Revised July 2017

**Please Note The Criteria for Use:**

**NOT** to be used for timed activities such as Cones Days (including Cones as part of a Graded Dressage Day), 3 Phase competitions, Indoor Competitions or CDEs.

**Acceptable** for use at Club rallies by a person interested in becoming a member.

**Acceptable** for use at an ACDS Show Driving activity, Graded Dressage Day (*See Note*) (not Cones added to a Graded Dressage Day), Pleasure Driving and Come & Try Days.

**Note:** *Graded Dressage – Competitors competing on a One Activity Membership are not required to have ACDS Horse Registration, however, the horse is not eligible for grading points, qualification for Championships or prizes at the event.*

- One Activity Membership provides for Public Liability/Personal Accident cover through the ACDS insurers to enable non members to experience some of the Society’s driving activities.
- A non member of the Society may apply for One Activity Membership to cover one activity, extending over a maximum of two consecutive days.
- Not to be used more than three times in a twelve month period.
- **Available to a person who has previously been a member of the ACDS - at the discretion of and with the agreement of the Club or State Executive organizing the event.**

<u>Single/Junior Membership</u>	Yes/No	<b>Fee \$30.00</b>
<u>Family Membership</u>	Yes/No	<b>Fee \$30.00</b>

Family Membership is available to persons being either:

- The spouse, de facto spouse of the applicant or one additional adult family member (aged 18 years or over) living at the same household (Family Members): or
- A child or grandchild of the applicant who has not attained the age of 18 years.  
*(Family Membership as defined under the Rules of the ACDS)*

Name..... DOB (if 80 years & Over) .....

Name..... DOB (if 80 years & Over) .....

Name..... DOB (If under 18 yo).....

Name..... DOB (If under 18 yo).....

Name..... DOB (If under 18 yo).....

Address: .....

..... Post Code: .....

Phone: ..... Email .....

ACDS Club hosting activity: ..... Date of Activity:.....

Location:.....

Type of activity: *(Please circle)*

Show Driving   Graded Dressage   Pleasure Drive   Come & Try Day   Club Rally

Other.....

**In applying for membership of the ACDS solely to participate in the stated activity, I/We understand that:**

- I/We must observe any instructions or advice given me/us by the ACDS officials conducting the activity.
- I/We cannot participate in any competition where speed, distance covered or fastest time taken is used to determine winners or place getters:
- **I/We cannot participate in speed cones, scurry driving, or competitive obstacle driving.**
- **I/We cannot participate in any activity where the results of two or more competitions are aggregated to determine winners or place getters.**

**Privacy:** I/we authorise the ACDS to publish and/or provide my/our contact details for the purpose of contact by other members and to publish any photographs of me/us in the ACDS Journal or on the website or on any other publication of the ACDS. Mark this box if you **do not** wish to have your contact details / photographs published.

**Public Liability Insurance:** Any person causing a claim to be made against the ACDS Inc. Insurance Policy is personally liable for the excess amount in full as determined by the Insurance policy at the time of the incident.

**Risk Warning & Acknowledgment:** Participating in the recreational activities supplied by the ACDS may involve risk. The risks involved may result in personal injury including death. Prior to undertaking such recreational activity, you should ensure you are aware of all the risks involved, including risks associated with any health condition you may have. By signing below, you acknowledge, agree, and understand that participation in the recreational services provided by the ACDS may involve risk. You agree and undertake any such risk voluntarily and at your own risk. You also acknowledge that the risk warning above constitutes a “risk warning” in accordance with relevant legislation. Furthermore, you acknowledge and agree that in the case of an insurance claim you are found to have caused, you will be responsible for the applicable excess payment on the insurance policy.

**PLEASE NOTE – Helmet Requirement**

Where helmets are worn they must comply with the following standards:

British – PAS 015: 1998 or 2011, VG1 01.040:2014-12 - provided they are BSI Kitemarked

European – VG1 01.040:2014-12 - provided they are BSI Kitemarked

American – ASTM F1163: 2004a or 04a onwards provided they are SEI marked or SNELL E2001 marked

Australian & New Zealand – AS/NZS 3838 2006 onwards and provided they are SAI Global marked

- **As of 1st January 2017 helmets which are certified to EN1384 only, will not be acceptable for use at ACDS activities.**

*I/We confirm we have read the Criteria for use of One Activity Membership and the above information.*

**Have you been an ACDS Member previously:** **Yes/No**

.....  
**Single Applicant’s Signature** **Parent/Guardian Signature (for applicants under 18)**

**Adult One**..... **Adult Two**.....  
**Family Applicant’s Signatures**

**The Single/Family/Junior One Activity Fee is \$30.00 (GST Inclusive) on each occasion. Maximum three uses per year.**

Paid \$..... Receipt No: ..... Club Secretary.....

- **Completed Form and Cheque to be forward to:**  
**ACDS Federal Secretary, 4 Centre Avenue, Bittern Victoria 3918**
- **Cheque payable to: ‘ACDS Inc.’**
- **Documentation and payment to be sent as soon as possible after the activity.**
- **Direct Banking Information: Bendigo Bank -South Melbourne Branch - BSB 633-000Account No. 150659837 – Please give surname of membership as the reference and ensure paperwork is sent to Federal Secretary with the advice paid by Direct Deposit.**

**GST: Upon payment of the One Activity Membership Fee – this Form becomes a Tax Invoice.**