**What is an Exemption and who can apply?**

The EA Exemption scheme provides exemption to EA Dressage Rules for riders who are a current member of Equestrian Australia and have an identified diagnosed disability or impairment supported by medical documentation who are either

* not eligible for Para-Equestrian classification or competition

 OR

* eligible for Para-Equestrian classification but do not wish to be classified for PE competition

Once the application is received by EA, all information will be forwarded to the EA Exemption Committee for consideration. The rider is then notified by EA in writing if approved or not approved.

**Personal Details (please print clearly)**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | D.O.B |  |
| Address |  | State |  |
|  | P/Code |  |
| Phone |  | Email |  |
| EA membership number |  |
| Present level of EA competition |  |

**Information about your relevant health condition and resulting disability**

***A certificate from a medical practitioner supporting your relevant diagnosed health condition and describing the resulting disability or impairment MUST be attached to this application. The Exemption Committee may request further information if required to make a decision.***

Please briefly describe of your diagnosed health condition relevant to this request.

|  |  |
| --- | --- |
| Date of onset of health condition: |  |
|  |
| Is the condition stable? | □ YES □ NO → is your health condition □ improving or □ worsening |
| Have you been classified for para-equestrian competition? | □ YES □ NO |
| If yes, what Grade were you allocated? |

**Your request for exemption (please print clearly)**

Please describe what you are requesting and why.

If you are requesting the use of specialised equipment or modifications to saddlery you **MUST provide a photo/s (jpg format under 1MB)** with your application.

|  |  |
| --- | --- |
| Applicable EA Dressage Rule or Article number/s  |  |
| What are you requesting to be exempted for? |
|  |
| Why are you requesting the above? |
|  |

|  |  |
| --- | --- |
| Signature of Applicant (if over 18 years of age) or Parent/Guardian (if under 18 years) | Date |
|  |  |

All documents and information provided will be held confidentially by EA.

Please forward completed form and supporting documentation to:

**Email:** danielle.obrien@equestrian.org.au

**Post: Equestrian Australia**

**PO Box 673**

**Sydney Markets NSW 2129**