

Bradbourne Riding and Training Centre

Rider registration form Jan 17

Please complete in block capitals and ensure every section is completed.

Rider details

Name:

DOB:

Height and Weight:

Email Address:

Address:

Contact number home:

Contact number mob:

Medical details

Emergency contact 1 (name and no.):

Emergency contact 2 (name and no.):

Doctors name, practise and contact no.:

Please detail ANY disability or medical condition that may affect the riders ability to ride or which the instructor should be aware of in case of an emergency:

Rider ability- circle all that applies

I consider my standard (or the standard of the minor I am signing on behalf of) to be:

Never ridden Beginner Novice Intermediate Advanced

How many times have you ridden (or the minor ridden) in the last 12 months?

None Under 12 12-40 40+

What do you believe you own (or the minors) capability is on a horse?

Walk Trotting with stirrups Trotting without stirrups Cantering Hacking

Jumps up to 0.5m Jumps over 0.75m X-country

P.T.O.....

This form must be completed and returned to the BRTC office

Riders under 18yrs of age: I accept full responsibility for my child and confirm that the above pre- assessed abilities are correct. I accept that my child rides at their own risk.

Riders 18yrs of and over: I confirm that the above pre- assessed abilities are correct. I accept that I ride entirely at my own risk.

Data protection act 1998: **Statement-** I understand that the information I have given will be held in accordance with the Data protection act 1998 but may also be made available to insurers and other concerned parties in the event of an injury or accident. I understand that I must obey the instructions of the instructor and must comply with the health and safety requirements of the establishment.

I confirm that to the best of knowledge all the above details are correct. I give permission for medical treatment to be administered in accordance with this form in the case of an emergency. A parent or guardian of riders under the age of 16 must sign this form.

I acknowledge that riding is a risk sport and holds a potential danger, and that all horses may react unpredictably on occasions.

If signing on behalf of rider please state relationship to rider.

Signature..... Print Name.....

I also agree that I have read the booklet named 'Bradbourne Riding and Training Centre registration form' and agree to the terms and conditions enclosed (including the cancellation policy)

Signature.....Print Name.....

Photographic rights- Riders and their parents give permissions for photographic and film footage taken of persons taking part in rides/activities to be used and published in any media whatsoever for editorial purposed, and advertising. I understand the riding centre will select photographs for publication with care and respect for those shown.

Signature.....Print Name.....