

RIDER REGISTRATION FORM

		nent CONFIDE	NTIAL - P	ease	complete all S	ections ar	nd Boxe	IS			
First Name:					Surname:						
Address:											
Tel(Home):					Tel (Mobile):						
Email:											
Date of Birth:			Age:		Weight:			Hei	ght:		
Occupation:											
-	rider you are signing	for, ever su	ffered a serio	ous inju	ury or discomfort w	hile riding o	r been ad	lvised not to	o ride?	Yes	No
If Yes, Please d	escribe:										
	y disability or medic on, which can affect							ot be limited	I to any	back pro	blems
			EN	IERG	ENCY CONTAC)Т					
Contact Name &	& Relationship					Tel:					
		RIDING A	BILITY/DE	CLAF	ATION - Tick a	ill boxes t	hat app	dv			
<u></u>						PROVENED POPULAT					
I consider mys	elf (or the person r	iding for wh	no I am sign	ing on	behalf as a minc	or) to be a:] _	_		
Complete Begin			Novice		Intermediate		Ac	lvanced]		
	es have you/rider r				None		er 12	12-	40		40+
Riding at a walk	elieve yours or the	person ridi	<u> </u>	ties to		pony to be	?			<u> </u>	
-		ang manoan			Trotting with	out stirrups		Ca	interina		
Hacking	Riding over jur	-			Trotting with Over jumps	out stirrups 0.75m (30")		Ca Riding over	intering cross co	ountry jui	mps
I confirm that to the I have read the Hor the riding school will Where I am signing or damage to proper I have read and unu Data Protection Ac	Riding over jun best of my knowledge all se Riders' Code of Condi not be liable for injury or g on behalf of a minor I hav ty unless it is caused by the derstand the lesson booki t 1998: Statement: I under I parties in the event of an	the above detail uct overleaf. I ur damage to properve explained the neir negligence. ng and cancella stand that inform	5m (18") Is are correct. Iderstand that rice rity unless it is co Riders Code of tion policy and a nation I have giv	aused by f Conduc gree to b	Over jumps ny standard has inherer y their negligence. t to my child and we bo bide by it all times.	0.75m (30") It risk that I may th accept the ris	fall off and	Riding over	cross co ed. I accep g school w	t that risk a	nd agree that ble for injury
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PLEASE SEE OVERLEAF FOR HORSE RIDERS CODE OF CONDUCT

RIDER REGISTRATION FORM THE HORSE RIDERS CODE OF CONDUCT

- I understand that riding at any standard has inherent risk and that all horses may react unpredictably on occasions.

- I may fall off and could be injured. I accept that risk.

- I understand that instructions are given for my safety and agree to follow instructions given to me by staff and instructors of the riding school.

- I reserve the right not to ride a horse allocated to me and may request a change of instructor.

- I understand that wearing an appropriate riding hat and body protector may reduce the severity of an injury should an accident happen and agree that I will always wear a riding hat whilst riding, leading and grooming horses at the riding school. I understand it is my choice whether or not I wear a body protector.

- I understand that the riding school will make decisions based on information I give them and agree to always be honest and volunteer information about:

- my abilities and riding experience
- any previous riding accidents
- any medical condition(s) which may affect my ability to ride

- I understand that children are at particular risk around horses and agree that I will keep children that I am responsible for, under close supervision when they are not being instructed by the riding school.

- I understand that the riding school may refuse my request to ride for safety or operational reasons.

- I understand that competing carries enhanced risk over and above general riding and agree that if I chose to participate in any competition or event, it is up to me to ensure that I have the experience and ability to ride the course including any jumps which form part of it. If I am in any doubt, I will use my judgment and experience and not enter.

Signed:

Dated: