

BERRIEWOOD FARM - Horse Rider Registration Form

CONFIDENTIAL – Please complete all boxes in capital letters

First Name Title Surname

Address c/o Concord College, Acton Burnell Hall, Shrewsbury, Shropshire Post Code: SY5 7PF

Tel:

Email:

Date of birth: Age Weight Height

Have you ever suffered serious injury or discomfort whilst riding ? Yes No
If yes, please describe:

Please detail any disability or medical conditions that may affect your ability to ride or which your instructor should be aware of in case of emergency (eg **back problems, diabetes, pregnancy**):

EMERGENCY CONTACT

Name & title Kari Butler, Summer Course Director Relationship Guardian Tel 01694731631

RIDING ABILITIES – Tick all boxes that apply

I consider myself to be Complete Beginner Beginner Novice Intermediate Advanced

How many times have you ridden in the last twelve months ? None Less than 12 12-40 40+

What do you believe your capabilities on a horse/pony to be? Riding at a walk Trotting with stirrups

Trotting without stirrups Cantering Hacking Riding over jumps up to .5m Over jumps .75m

Riding over cross country jumps

I acknowledge that **RIDING IS A RISK SPORT AND HOLDS A POTENTIAL DANGER** and that all horses may react unpredictably on occasions. I understand that I must obey the instructions of the instructor and must comply with the health & safety requirements of the establishment. I reserve the right not to ride a horse allocated to me and request a change of instructor.
I confirm that to the best of my knowledge all the above details are correct. A parent/guardian of riders under 18 must sign this form.
RIDERS UNDER 18 YRS OF AGE: I accept full responsibility for the above person and confirm that the above pre-assessed abilities are correct.
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 also may be made available to Insurers and other parties in the event of any injury or incident.

SIGNATURE **Print Name** **Date**

If signing on behalf of rider please state relationship to rider

If signed by a person in loco parentis for a rider under 18years of age, it is confirmed that the parents/guardian of the rider are aware of this activity. **YOU ARE STRONGLY ADVISED TO TAKE OUT FULL PERSONAL ACCIDENT INSURANCE COVER.**