

## PARTICIPANT INFORMATION FORM - PLEASE COMPLETE ALL SECTIONS

Participant details (or parent/guardian details if rider is under 18 years). If signing on behalf of a minor, I certify that I am the legal guardian, and am duly authorized to sign on their behalf.

### PARTICIPANT INFORMATION

Participant Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_

Participant Mobile Number: \_\_\_\_\_

Best Contact Email Address: \_\_\_\_\_

Parent/Guardian Name (if participant >18yrs) \_\_\_\_\_

Parent/Guardian Mobile No: \_\_\_\_\_

### PARTICIPANT EMERGENCY CONTACT

EMERGENCY CONTACT NAME \_\_\_\_\_

EMERGENCY CONTACT MOBILE NUMBER: \_\_\_\_\_

### PARTICIPANT EXPERIENCE

What is the participants riding experience? Please tick all applicable boxes.

☐ NIL

☐ Trail riding

☐ Lessons

☐ Competition

When was the last time the participant rode a horse?

☐ Never

☐ In the last month

☐ In the last year

☐ Over a year ago

### MEDICAL DECLARATION

☐ The Participant **HAS NO** physical, mental or developmental conditions that would impact their ability to maintain balance, think quickly and act under instruction on a horse.

If the Participant **HAS** a physical, mental or developmental condition that would impact their ability to ride safely we would appreciate their honesty and ask that they provide detailed information regarding the condition allowing us to assess the lesson/activity and the rider's safety in line with our duty of care. Please note we may get in touch to clarify or request further information if needed.

***\*\*Please note – failure to disclose this information could result in your lesson or activity being concluded early by our instructor with no payment compensation\*\****

### ACKNOWLEDGEMENTS

- ☐ The participant/parent/guardian/ has read and understood the Anstead Acres Terms of Service they have been provided covering general service information, payment terms, disruption to scheduled lessons and activities, valid cancellation notification, payment terms and cancellation terms.
- ☐ The participant/parent/guardian/ grants permission to Anstead Acres to photograph the rider during Anstead Acres activities that may be used for advertising, social media and web pages.
- ☐ The participant/parent/guardian/ is aware that all or any disruption to activities at Anstead Acres i.e. illness or weather will be communicated via our Facebook Group 'Anstead Acres Members Group' or via contact information provided.

### ACCEPTANCE

Participant/Parent/Guardian Signature \_\_\_\_\_

Today's Date: \_\_\_\_\_

***Thank you, we look forward to seeing you at Anstead Acres soon.***