



Palmer's Rider Registration Form

Confidential: please complete **all** sections, to enable us to provide emergency notification.

First name: _____ Surname: _____

Address: _____

Postcode: _____

Tel: (home) _____ Tel: (mobile) _____

e-mail address: _____ Occupation: _____

Date of Birth: _____ Age: _____

Weight: _____ Height _____

| | |
|--|--------|
| 1. Have you ever suffered a serious injury? | Yes/No |
| 2. Have you ever suffered discomfort while riding? | Yes/No |
| 3. Have you ever been advised not to ride? | Yes/No |
| 4. Have you any disability or medical condition that may affect your ability to ride, or which we should be made aware of (e.g. back problems, allergies, any condition which can affect balance/cause blackouts/loss of consciousness/epilepsy/fitting, diabetes, pregnancy or any medication taken). | |

Emergency contacts:

Name:

Tel no:

Relationship:

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Rider ability/Declaration OR I am signing on behalf of the person riding;

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| Riding at walk: | |
| Trotting with stirrups: | |
| Trotting without stirrups: | |
| Cantering: | |
| Hacking: | |
| Riding over jumps up to 0.5m - 0.75m (1'6" - 2'6") | |
| Riding over Cross Country Jumps: | |
| How many times have you ridden in last 12 months? | |

I confirm the above details are correct and have read the Horse Riders' Code of Conduct below. I understand that riding at any standard has inherent risks, and that I may fall and could be injured. I accept that risk and agree that the Riding Instructor/Stables will not be liable for injury or damage to property unless caused by their negligence. We make every effort to ensure the safety of our clients and their property. However, clients and visitors must accept the risk of personal injury or loss for whatever reason whilst attending the establishment. I have read and agree to the booking and cancellation policy.

Horse Riders' Code of Conduct

- I understand that riding at any standard has inherent risk and that all horses may react unpredictably.
- I may fall off and could be injured - I accept that risk.
- I understand that instructions are provided for my safety and agree to follow instructions given.
- I understand that wearing an appropriate riding hat (to current standards) 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. I understand it is my choice whether or not I wear a body protector.
- I understand that my Riding Instructor 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 competitions carry enhanced risks over and above general riding and agree that if I choose to participate in any competition or event, it is my responsibility. If I am in any doubt, I will use my judgement and experience and not enter.

| | |
|----------------|--------------------|
| Signed: | Print name: |
|----------------|--------------------|

If signing on behalf of a minor:

| | | |
|---------------------|----------------------|--------------|
| Riders name: | Relationship: | Date: |
|---------------------|----------------------|--------------|