

A RICHMOND VALLEY RIDING SCHOOL

Confidential Riding Application and Medical History Form



NAME:(Rider). AGE: (if under 18); Over 18 (check box)

CONTACT PHONE NUMBERS:

I am applying to ride with A Richmond Valley Riding School and I agree to the following:

- I will only ride the horse in a safe and controlled manner.
- I will wear an Australian/European/US Standard Approved riding/ helmet and the correct footwear at all times.
- I will read and follow all signs on the property and follow all instructions, including property rules.
- The Instructor may cancel my ride if I do not comply with any of these terms and conditions.

APPROVED HELMETS ARE COMPULSORY

Riding experience (1) The number of times the rider has ridden in the last 12 months.
 (2) Indicate below the number of times the rider has ridden in total.

0-10	10-20	20-50	50-100	100+
Little experience	Some experience	Average experience	Experienced	Very experienced

The following information is intended to assist A Richmond Valley Riding School in case of any emergency with you/your child. Learning difficulties need to be discussed, so the Leaders are able to accommodate accordingly. Please describe any Learning Concerns if any.....

Name and telephone numbers of contact people.

Emergency Contact Name	Relationship to rider	Home	Work	Mobile
*To be completed if rider is under 18				
	* Mother (full name)			
	* Father (full name)			
	*			

Do you (or your child) suffer from any of the following? NO (Please tick if applicable)

Please circle: Any pre-existing medical or other condition that may affect or risk other persons or myself.

Asthma, Diabetes, Epilepsy / Fits, Fainting / Dizziness, Blackouts / Migraines, Disability,
 Heart / Blood Condition, Allergic Reactions, Pregnancy, Uneven Pupils, Recent Injuries, Medications,
 Other.....

Allergies

Describe:.....

Describe reaction.....

Tetanus Immunisation

It is particularly important that people dealing with horses are immunised against tetanus. Tetanus is normally given at five years of age as Triple antigen or CDT and at fifteen years of age as ADT. Year of last tetanus immunisation.....

Medication

Is it necessary for you or your child to carry their own medication at all times.

Name of drug:.....Dosage.....Frequency.....

Consent To Medical Attention

I authorize the instructor in charge to administer first aid and call an ambulance if necessary for the medical attention of me and or my child. I agree to bear any cost thereby incurred.

Signature of Rider/Parent/Guardian:.....Date:.....

Name of Rider/Parent/Guardian:

Privacy Statement – Privacy Act 1998

By completing this form you are supplying A Richmond Valley Riding School with personal information about yourself. This information is needed to ensure your safety during your time with us. A Richmond Valley Riding School is required to collect this information by our insurance company and by the department of Workplace Health and Safety. This information you provide will not be supplied to any other organisation or used for any other purpose than that which is stated above

RIDER EXPERIENCE & INDUCTION (to be accompanied with physical induction on arrival)



Please print, fill in as much as possible and bring for completion.
(Allow approx 10-15 minutes prior to commencement of first lesson)
If details should change please inform coach and update relevant form/s.

PARTICIPANT NAME:.....AGE:.....DOB:.....

EMAIL.....

Where did you hear about us? Facebook [] Website [] Google [] GumTree [] Recommendation []
Pony Party [] Flyer [] Yellow Pages [] Other []

- Approx last time you rode? NEVER [] DAYS [] WEEKS [] MONTHS [] YEARS []
Type of areas? ENCLOSED ARENA [] OPEN FIELD [] BUSH [] BEACH []
Whose Horse? OWN/LEASE [] BORROWED [] RIDING SCHOOL [] OTHER []
Your riding levels: N/A [] LEAD ROPE [] WALK [] TROT [] CANTER [] GALLOP [] JUMP []
Can you rise trot and steer un-assisted? YES [] NO [] UNSURE []
Have you ever fallen off? YES [] NO [] MORE THAN ONCE [] ALMOST []
Have you ever owned, borrowed or leased a horse? YES [] NO []
Do you have a horse currently? YES [] NO []
Do you intend to ride your horse here? N/A [] YES [] NO [] EVENTUALLY [] UNSURE []
At what pace are you confident riding your horse? N/A [] LEAD ROPE [] WALK [] TROT []
CANTER [] GALLOP [] JUMP []

PLEASE TICK BELOW when DISCUSSED and UNDERSTOOD (Why, What, How, Where to Find etc.)

- Body Protectors are not compulsory but strongly recommended
Current Standard Riding Helmet MUST be worn at all times
Riding boots with flat sole or little grip, slip on with a heel to be worn, unless toe stoppers attached to stirrups
Jodhpurs/comfortable full length trousers a must, no shorts/skirts. Long sleeve shirts preferable.
Long hair tied back /minimum jewellery/no scarves
Gloves/chappettes optional (offer some protection/warmth)
I have listened to or read and accept the PROPERTY RULES
Rider mobile phones to be turned off and secured (may be kept on vibrate if essential)
Lost property is kept until close of business each year then dropped at charity bin
Emergency/Evacuation Procedures explained. Proceed to car park
Parking Area/Overflow Car-park/Float Parking (emergency vehicle access to be kept free)
I understand visitors with me must read & ACCEPT property rules & sign in/out each visit
MISSED LESSONS INCUR A \$20 FEE: Less than 24 hrs notice = full lesson price
I give permission for photos taken during lessons to be used for advertising purposes
My initial queries/questions answered satisfactorily

I acknowledgement, understand and accept the above by signing below:

Parent/Legal Guardian Name & Signature (if participant u/18)

.....
.....

Participant Signature..... Date.....

RISK WARNING SIGN

Exclusion of Right to Sue

These Conditions Affect Your Legal Right.

PLEASE READ CAREFULLY

A Richmond Valley Riding School their employees and agents shall have no liability howsoever caused to YOU or any dependant for personal injury or death suffered by YOU or any dependant arising in any way whatsoever from the supply by A Richmond Valley Riding School of recreational services, including but not limited to

HORSE RIDING , ARENA & OPEN AREA INSTRUCTION (mounted & unmounted) including HORSE MANAGEMENT, TRAIL RIDES, HORSE TRAINING, EQUINE EVENTS & PONY PARTIES, AGISTMENT & ADVICE.

“Recreational Services”

YOU acknowledge that Recreational Services are dangerous activities with many inherent risks as a result of which personal injury (and some times death) are common. YOU by your participation accept all risks of personal injury or death in any way whatsoever arising from your participation in such recreational activities and YOU and any dependants release and forever discharge A Richmond Valley Riding School and its employees and agents from all and any liability and claims arising from the supply of the Recreational Services.