



SCROPTON RIDING & DRIVING CENTRE

RIDER REGISTRATION FORM

First Name		Surname	
Address			
Tel. (Home)		Tel. (Mobile)	
Email		Occupation	
Date of Birth		Age (if under 18)	
Weight		Height	
Emergency contact		Tel.	

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

Do you consider yourself to be a:		How many times have you ridden in the last 12 months	What do you believe your capabilities on a horse/pony to be?		
Complete Beginner					
Beginner		None	Riding at walk		Hacking
Novice		Less than 12	Trotting with stirrups		Riding over jumps up to 0.5m
Intermediate		12 - 40	Trotting without stirrups		Riding over jumps up to 0.75m
Advanced		40+	Cantering		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 confirm that to the best of my knowledge all the above details are correct.
 I Understand that the information I have given will be held in accordance with the Data Protection Act 1998 but may also be made available to insurer and other parties in the event of any injury or incident.
 Riders aged 16 years and over: I confirm that the above pre-assessed abilities are correct & I agree that I ride entirely at my own risk.
 Riders under 16 years of age: A parent or guardian must sign this form and must accept full responsibility for the child and confirm that the above pre-assessed abilities are correct.

Signature		Relationship to rider if signing on their behalf	
Print Name		Date	

TO BE COMPLETED BY INSTRUCTOR/SUPERVISOR

Assessment Lesson		Capabilities judged as:		Lesson content	
		Complete Beginner (Lead rein/Lunge)		Walk	
Horse used		Beginner (Beginning walk,trot independently)		Trot	
Date		Novice (Walk,trot,canter independently)		Canter	
Time		Intermediate (Jumping Stage1)		Jump	
Lesson type		Advanced (Stage 2, equivalent and above)		W/O Stirrups	
				Lateral	
Name		Position		Signature	