

APPLICATION FORM FOR RIDERS, VAULTERS AND CARRIAGE DRIVERS
(PLEASE USE BLOCK CAPITALS AND RETURN TO GROUP ADDRESS BELOW)

RDA



To be completed by RDA group before being given to applicant	
GROUP NAME	AVON RIDING CENTRE
CHARITY NO	281648
CONTACT NAME	Claire Evans / Kim Langbridge
ADDRESS	Kings Weston Road, Henbury, Bristol, BS10 7QT
EMAIL	reception@avonridingcentre.org.uk
TEL NO	0117 959 0266

If you are under 18 years or someone else normally completes your paperwork for you, this form should be completed and signed on your behalf by your parent or legal guardian.
 All information will remain confidential, for use by relevant RDA personnel only.

1 YOUR DETAILS

Last Name, First Name		Likes to be called	
Date of Birth		Age	
Address			
Email Address			
Telephone Number		Mobile Number	
Riding/Carriage Driving	Do you have any previous experience with an RDA Group?	Yes	No
	If YES, what is the Group's name?		
	If YES, have you passed any proficiency test(s)? If YES, to what level?	Yes	No
School/Training Centre	Are you joining as part of a School or Training Centre?	Yes	No
	If YES, what is the School/Centre name, contact and phone number?		

2 SPECIFIC INFORMATION ABOUT YOU

What is your disability, condition or diagnosis?
Are you on any medication that may cause side effects during your time at RDA? If so, what is the medication and potential side effect(s)?
What, if any, conditions do you have that may need special attention during your activities with RDA? (It is the applicant's responsibility to ensure that we have knowledge of all issues that might pose a problem)
Please provide name and contact details of a Medical Professional who knows you and your medical conditions:

3 ADDITIONAL INFORMATION

Height		Weight	
Speech	Do you have problems with speech?	Yes	No
Eyesight	Do you have problems with eyesight?	Yes	No
	Do you wear glasses / contact lenses?	Yes	No
Hearing	Do you have difficulty with hearing?	Yes	No
	Do you wear a hearing aid?	Yes	No
Instructions	Do you have difficulty understanding instructions?	Yes	No
Walking	Do you need help walking?	Yes	No
	Do you use walking aids?	Yes	No
	Do you wear orthopedic appliances?	Yes	No
	Do you use a wheelchair?	Yes	No
	Would weight-bearing be a problem?	Yes	No
Please give any additional information that you think would be useful for the RDA Group Instructor:			

4 DECLARATION

I wish to apply as a rider/vaulter/carriage driver of an RDA Group and confirm that all details given are accurate, to the best of my knowledge.

I agree that should the Group Instructor require additional information on my medical condition, at any time, I will provide what is required and be willing to get a medical report from a Medical Professional who is familiar with my condition if necessary. I understand that I may be required to pay a fee for such a report.

I confirm that I will advise you immediately if any of the information provided on this form changes in any way. I recognise that this activity involves risk and that I, the rider/vaulter/carriage driver, should take all reasonable precautions and follow all advice properly given.

I understand by nature horses are unpredictable and that means they may react to a situation or to the local environment in such a way that a rider/vaulter/carriage driver may be unseated in an accident.

In the absence of any negligence on the part of the RDA or the Group, I accept that no liability will attach to either of them.

Photos/Videos	Do you consent to photographs/videos being taken during RDA activities for training and/or publicity (including websites and social media)?	Yes	No
Signature	Rider/Vaulter/Carriage Driver/Parent/Guardian (Delete as appropriate)	Date	

5 APPLICANT'S PARENT OR LEGAL GUARDIAN CONFIRMATION OF CONSENT TO JOIN RDA

(if the form has been completed by a parent/legal guardian or the applicant is under 18 years old)

Name			
Relationship to Applicant			
Address			
Home Telephone No.		Emergency Contact No.	

RDA Group Use:	Date Application Received:	_____
Is application approved or declined? (delete as applicable)	<u>APPROVED / DECLINED</u>	
Is Approval Subject to Trial Period?	Y / N	If Yes - Trial End Date: _____
APPLICATION REVIEW DATE (At least every 3 years)		

Avon Riding Centre for the Disabled Ltd
Terms and Conditions

1. New riders will be asked to pay £11 for an initial assessment session.
2. After a successful assessment you will be offered a session at the same day and time each week. The day and time offered will be the session considered the most appropriate for you at the time and is most likely to be in school time. This is subject to regular review, and you may at any stage be asked to change sessions or 'take a break' from riding if your instructor feels this would be appropriate. A session may include mounted and dismounted activities. Sessions may take place in the indoor arena, outdoor arena or the stable yard.
3. Any hostile, abusive or intimidating behaviour towards the staff or volunteers at Avon Riding Centre may result in the immediate termination of your riding sessions without notice.
4. Sessions are charged every half term in advance (this is an invoice period), and need to be paid by the date stated on the invoice. Invoices must be paid by the due date to ensure riding can continue.
5. In the rare and exceptional circumstances that your ride is cancelled for a given week your account will be credited with the cost of that session.
6. If you cancel a session you will be charged.
7. If you cancel sessions as a result of surgery or a broken limb your account will be credited and your place reserved for a maximum of 2 invoice periods. Medical evidence of the procedure will be required.
8. If you cancel please give as much notice as possible to ensure horses and volunteers are used most effectively. Please tell us how many sessions you expect to miss.
9. If you wish to cancel your riding sessions permanently one month's notice must to be given in writing. If we do not receive this you will be invoiced for the balance.
10. There is a maximum riding weight of 12 ½ stone or 79 kg.
11. Riders must wear a riding hat that meets current safety standards and fits correctly. They may be borrowed from the Centre. Body protectors may be worn, but are not provided or fitted by the Centre.
12. You recognise that riding is a risk sport and voluntarily accept the risks involved. You further understand the need for the rider, or carer, to take all reasonable precautions. In the absence of any negligence on the part of Avon Riding Centre for the Disabled Ltd. you accept that no liability will attach to them.
13. You will inform the Centre of any change to your condition, medication, contact details and emergency contact information.
14. These terms may change with a minimum of two weeks' notice to you. It is your responsibility to check the website to ensure you are aware of the most recent Terms and Conditions, or request a paper copy from the Centre.
15. By continuing to ride with Avon Riding Centre you accept these terms as they are laid out.