

Please complete the enrolment form and return it to Chigwell Riding Trust.

Please enclose a stamped addressed envelope if you would like an acknowledgement of receipt of your form.

In due course you will be contacted and a date arranged for an assessment. Please be aware that we have a long waiting list and you may not hear from us for some time.

**Please keep in mind that all of the riding lessons are heavily subsidised by voluntary donations and staff numbers are kept to an absolute minimum - most of the people that you see on the yard are volunteers. To make the very best use of these donations of both money and time we will strictly enforce the following Terms and Conditions.**

## TERMS & CONDITIONS

A full terms notice of cancellation must be given (or payment will be due for that term).

Fees are payable in advance for a specified period. No riding will be allowed if payment has not been received.

All riding fees are non refundable / non transferable.

In the event of the client cancelling (for any reason) no refund will be given.

For the safety of our riders, staff and volunteers full information must be provided regarding the rider. We need to know of any behavioural problems (biting, kicking, hyperactive, does not like waiting, etc.).

A hat must be worn at all times for riding unless for some medical reason the rider is unable to wear a hat. If this is the case then additional permission will have to be sought and risk assessments will have to be carried out.

Sensible shoes or boots must be worn at all times when on the yard. No sandals or similar can be worn when riding or helping.

Please come dressed appropriately. Long trousers must be worn at all times for riding, preferably not jeans. No shorts, skirts or cropped trousers at any time. We recommend that you wear gloves.

If wearing a coat/fleece/cardigan etc. it must be done up - no clothes that could "flap" and upset the horse.

When you arrive for your first lesson please arrive at least 10 minutes before your allocated riding time so that a suitable size hat can be fitted. We provide the loan of a hat for the riding session free of charge.

The riding centre is very busy and we work to a strict timetable. If you are late for a lesson we will be unable to extend the finishing time of the lesson. If you arrive for a lesson more than ten minutes late the horse that was prepared for you will be untacked. If you know that you will be late please advise us and we will endeavour to help. Your riding time includes the mounting and dismounting procedure for the whole group.

Should you have any questions please contact Deborah Hall or Pat Tierney on 020 8500 6051 or 0845 241 4327.



Chigwell Riding Trust  
 Grange Farm  
 High Road  
 Chigwell  
 Essex  
 IG7 6DP

Tel. 020 8500 6051

admin@chigrade.org.uk

## RIDER ENROLMENT FORM



Reg.Charity 212644

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 Chigwell Riding Trust personnel only.

### RIDER DETAILS

First name		Last name	
Date of Birth			Age
Address			
Email address			
Telephone number	Mobile number		
Riding experience	Do you have any previous experience with an RDA group? If YES, what is the Group's name?	YES	NO
	If YES, have you passed any proficiency test(s)?	YES	NO
	If YES, to what level?		
School/Training Centre	Are you joining as part of a School or Training centre? If YES, what is the School /Centre name, contact and telephone number?	YES	NO

### SPECIFIC INFORMATION

What is your disability, condition or diagnosis?
Are you on any medication that may cause side effects during your time at Chigwell Riding Trust? 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 Chigwell Riding Trust? (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.

**ADDITIONAL INFORMATION**

Height		Weight	(limit 12 stone / 76 kg)	
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:				

**DECLARATION**

I wish to apply as a rider of Chigwell Riding Trust 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, 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 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.

Photographs / Video	Do you consent to photographs / video being taken during Chigwell Riding Trust activities for training and/or publicity?	Yes	No
Signature		Date	
Rider / Parent / Guardian (Delete as appropriate)			

**APPLICANT'S PARENT OR LEGAL GUARDIAN CONFIRMATION OF CONSENT TO JOIN CHIGWELL RIDING TRUST / RDA** (If the form has been completed by a parent/legal guardian or the applicant is under 18 years of age)

Name			
Relationship to applicant			
Address			
Home telephone no.		Emergency contact no.	

<b>Chigwell Riding Trust use only</b>	Date application received
Is application approved or declined? (delete as applicable)	APPROVED / DECLINED
Is approval subject to a trial period? Y / N	If YES - Trial end date
Application review date (At least every 3 years)	Date: