

# DELNY RIDING CENTRE

## Client Information

### Personal Details

Name.....

Date of Birth.....Age.....

Address.....

.....

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Telephone Number.....Mobile.....

Height.....Weight.....

### Previous Experience

None      Beginner      Novice      Intermediate      Experienced

Competent at

Walk      Rising Trot      Canter      Gallop      Jumping

### For your information

Horse riding is a risk sport and therefore holds potential danger. For your own safety and the safety of others, it is important that you adhere to all yard and riding school rules and give a correct assessment of your ability of riding on this form.

### Acceptance

I declare that the above information given by me is correct.

Signature.....Date.....