**BEWDLEY BRIDLE CLUB CAMP APPLICATION FORM 2018**

**Camp Dates – Monday 14th May until Wednesday 16th May 2018**

Please complete one form per Horse/Rider combination and return to Louisa Renshaw before **4th February.** We will then put all applicants into a hat and draw out 16 names. Any names left over will go on a waiting list.

You will be email before 10th February to confirm if you have a place and then you will need to pay your deposit of £100 into the BBC Bank account (Sort Code 40-43-17, Account No 42500019) by 20th February to confirm your acceptance. Should anyone fail to pay by this date their place will be passed onto the next person on the waiting list.

Total cost for camp - £240 (this includes stable, bedding, your food, all lessons, demos and entertainment) The remaining balance will need to be paid no later than 20th April.

Please return your completed application form to**: - Louisa Renshaw, Holbeach House, 98 Wolverley Road, Kidderminster, Worcs. DY11 5JN Email:** [louisa@equinepr.co.uk](mailto:louisa@equinepr.co.uk)

**About You**

|  |  |  |  |
| --- | --- | --- | --- |
| **FIRST NAME:** |  | | |
| **SURNAME:** |  | | |
| **ADDRESS:** |  | | |
| **CONTACT NO.:** |  | | |
| **EMAIL:** |  | | |
| **EMERGENCY CONTACT** |  | | |
| **RELATIONSHIP** |  | **CONTACT NO.:** |  |
| **ADDITIONAL MEDICAL INFORMATION** |  | | |
| **T-SHIRT SIZE** | **10 12 14 16 18** | | |

**About Your Riding and Your Horse**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Horse Name |  | | Height | |  | |
| Age |  | | Sex | |  | |
| Flatwork Level | Prelim | | Novice | | Elementary + | |
| Jumping | None | Poles | 60-70cm | 70-80cm | 80-90cm | 90cm+ |
| Horse Experience | Green/ Novice | | Experienced | | Senior | |
| Any Vices | Weaving / Cribbing | | Biting/ kicking | | other | |

**Accommodation**

**Horses** – All horses unless specified will be bedded down on straw. Should you require shavings this will be at an extra cost of £8.00 a bale or you can bring your own.

Please confirm your bedding requirements (please circle) – Straw Shavings Bring my own.

**Rider –** Please could you confirm how you will accommodate yourself while at camp.

……………………………………………………………………………………………………………………..

The pop is available but will be at an extra cost. Do you require a ‘Pod’ bed? Yes/ No

Please state any specific dietary requirements: Vegetarian / gluten free/ ………………………………….

Anything else you feel we should know?………………………………………………………………………..………

The organiser's do not accept liability for any injury, death or other loss, however caused, to any of those attending the above clinics/ camp in whatever capacity. The organiser's shall not be liable to make good any losses or consequential losses caused by any delays in or cancellations of the above events due to circumstances beyond their control.

I confirm that the above pre-assessed abilities are correct and I agree that I RIDE ENTIRELY AT MY OWN RISK.

I understand that I must obey the instructions of the instructor and must comply with the Health & Safety requirements of the establishments. I confirm that to the best of my knowledge all the above details are correct.

I acknowledge THAT RIDING IS A RISK SPORT AND HOLDS POTENTIAL DANGER, and that all horses may react unpredictably on occasions.

* Please note at the request of Lincomb Equestrian no dogs are allowed at camp this year

Signature ……………………………………………….. Date…………………………………………………...

Print Name…………………………………………………………………………….…………………………….

Please use this space below for any additional information we may need to know;