

# **2025 CAMP Application Form**

**Dates**Monday 19<sup>th</sup> to Wednesday 21<sup>th</sup> May 2025 **Location**Lincomb Equestrian Centre, Lincomb, Stourport

Total cost for camp £300

Please complete one form per Horse/Rider combination and return to Nicky Lord before **17**<sup>th</sup> **February 2025**. You will also need to pay your deposit of £150 into the BBC bank account by this date. Places are limited and will be allocated on a first come, first served basis.

The cost includes stable, breakfast, lunch and evening meal, soft drinks and snacks, lessons, demos and entertainment.

#### **PLEASE NOTE**

Bedding can be obtained from Lincomb at a cost of £6/bale straw. You may bring your own bedding, shavings or straw. All hay and hard feed are on a 'bring your own' basis.

The remaining balance will need to be paid no later than 1st April 2025

Please return your completed application form, via post to: -

Via post -

Nicky Lord Hill House Wolverley Worcestershire DY11 5TQ

### Via email - nickyjlord@outlook.com

Bank account details Bewdley Bridle Club

Sort code - 40-10-13

Account number - 50183156

### Please note the following restrictions:

- Any non riders/visitors will be charged for food and refreshments £5/day.
- There will be a shared tack room available. Riders are expected to keep their tack rooms tidy and equipment such as mucking out equipment needs to be brought.
- Horses will be allocated stables and they must stick to these stables.
- Horses will not be allowed to be tied up outside the stables for ANY reason. All mucking out and tacking
  up must be done in the stables.
- A £30 refundable cash deposit is required for stables. Please provide this in an envelope with your name on arrival. This will be returned on departure providing your stable is clean and empty. This is a requirement of Lincomb Equestrian.
- NO dogs will be allowed on site



- Catering facilities are available including fridge, microwave, kettle, toaster. There will be **NO** cups/glasses/mugs so please bring your own.
- Current and correct hat and body protector standards must be adhered to at all times. Hats must worn at all times whilst mounted. Body protectors are compulsory on the cross country course.
- Lincomb Equestrian rules and guidelines must be followed at all times.
- Accommodation is available onsite but should be booked directly with Lincomb at tonysymonds2@mac.com

### **About You**

| FIRST NAME:  SURNAME:          |  |
|--------------------------------|--|
| SURNAME                        |  |
| OUTHAINE.                      |  |
| ADDRESS:                       |  |
| CONTACT NO.:                   |  |
| EMAIL:                         |  |
| EMERGENCY<br>CONTACT           |  |
| RELATIONSHIP CONTACT NO.:      |  |
| ADDITIONAL MEDICAL INFORMATION |  |

## **About Your Riding and Your Horse** (circle where appropriate)

| Horse Name  |        | Height |              |  |  |
|---|--------|--------|--------------|--|--|
| Age   |        | Sex    |              |  |  |
| Colour  |        |        |              |  |  |
| Any stable requirements / restrictions ?                |        |        |              |  |  |
| Please tell us what you would like to do whilst at camp |        |        |              |  |  |
| Flatwork Level  | Prelim | Novice | Elementary + |  |  |



| Jumping –<br>showjumps | None             | Poles      | 60-70cm         | 70-80cm  | 80-90cm  | 90cm+ |
|------------------------|------------------|------------|-----------------|----------|----------|-------|
| Jumping - XC           | None             | Up to 50cm | 60-70cm         | 70 -80cm | 80cm+    |       |
| Horse Experience       | Green/ Novice    |            | Experienced     |          | Old hand |       |
| Any Vices              | Weaving / Cribbi | ng         | Biting/ kicking |          | Other    |       |

| Α | C | c | റ | m | ۱r | n | o | d | а | ti | റ | n |
|---|---|---|---|---|----|---|---|---|---|----|---|---|
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| <b>Horses</b> – do you have specific requests – for example size of box or 'next to xxxx'. We will accommodate all requests where possible. |                      |                     |                      |                                |  |  |
|---|----------------------|---------------------|----------------------|--------------------------------|--|--|
|   |                      |                     |                      |                                |  |  |
| Rider - Please could  | d you confirm how yo | ou will accommodate | yourself while at ca | mp.                            |  |  |
| Tent  | Caravan              | Lorry               | Trailer              | Lincomb's Onsite accommodation |  |  |
| Please state any specific dietary requirements:   |                      |                     |                      |                                |  |  |
| Anything else you feel we should know?  |                      |                     |                      |                                |  |  |
|   |                      |                     |                      |                                |  |  |
|   |                      |                     |                      |                                |  |  |

The organisers do not accept liability for any injury, death or other loss, however so caused, to any of those attending the above clinics / camp in whatever capacity. The organisers 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.

By signing this application form, 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.

| Signature   | Date                        |
|---|-----------------------------|
|   |                             |
|   |                             |
| Print Name  |                             |
|   |                             |
| Please use this space below for any additional inform | nation we may need to know: |