




## Rider Registration Form

Name (of Rider)..... Surname .....

Address .....

..... Postcode .....

Phone  Home..... Work..... Mobile.....

Date of Birth ..... Occupation .....

Email (Please Print).....

**IMPORTANT – Horse weight bearing capacity is a maximum 90kg. Riders must be under this weight**

*If you are a rider under the age of 18 years – Parent or Guardian is to fill out this section  
(Please Circle)*

Full Name..... Parent / Guardian

Contact Phone.....

Consent for minor to ride under the Indemnity form terms & agreement: .....  
(Sign Here)

DATE

**Do you suffer from any of the following medical conditions?**

**Are you registered with NDIS**

Asthma / Diabetes / Fits of any type / Heart Condition / Dizzy Spells / ADHD

Due to teaching methods – Please state if there are any other learning difficulties or Medical Conditions that may affect your riding .....

**Riding Experience**

*(Please Circle)*

Never Ridden a horse / Have Ridden a couple of times / Novice Rider / Experienced Rider

**What do you want to gain from your experience at Ranchlands?**

*(Please Circle)*

Social Horse-riding for leisure & fitness / Riding with intent to compete/own a horse

**Where do your interests lie?**

Basics of Riding / Dressage / Jumping / Fun Events / Social

**How did you find out about us?**

**Signed by Rider( if over 18) .....** **Date .....**

**HORSE RIDING & ACTIVITIES**  
**AGREEMENT & INDEMNITY**  
**FOR RANGLANDS EQUESTRIAN CENTRE**



As a condition to my accepting to participate, I hereby acknowledge that I participate at my own risk and that I am aware that activities involving horses can be hazardous and that Ranchlands Equestrian Centre and it's servants accepts no responsibility or liability for any injury or loss that I might sustain as a direct or indirect consequence of any act or omission by Ranchlands Equestrian Centre or it's servants, agents, representatives or volunteers, except in regard to any rights I may have arising under the Trade Practices Act 1974.

I declare that I am in sound condition and undertake participation with the knowledge of the physical demands required.

I consent to receiving any medical treatment, including ambulance transportation that Ranchlands Equestrian Centre thinks desirable during or after participating. I acknowledge that the safety precautions undertaken by Ranchlands Equestrian Centre are a service to me and other participants but are not a guarantee of safety. I understand that horses are unpredictable by nature, that when frightened their instincts are the jump forward or sideways, to run away from danger, to kick, to rear up or to bite.

**Riders Duties**

- I agree that I will not ride if I am under the influence of alcohol and/or drugs.
- While the instructor may also inspect the riding equipment from time to time, I agree that I will be ultimately responsible for checking my equipment, including the saddle, and if there are any problems, or the saddle becomes loose, I will tell the instructor immediately.
- I agree to follow my instructors instructions at all times.
- I agree that as a condition of riding I must wear a helmet and suitable footwear.
- I agree that I will be responsible for any injuries to the rental horses, damages to the premises, property owned by others, injuries to any other riders or pedestrians, which I may cause by negligent, reckless or irresponsible conduct.

All minors must have a parent or guardian sign this acknowledgment and indemnity form for them.

By signing my name below, either in person or by one of my representatives, I hereby agree to comply with all of the terms and conditions stated above.

**Privacy Statement – Privacy Act 1998**

By completing this form you are supplying Ranchlands Equestrian Centre with personal information about yourself. This information is needed to ensure your safety during your time with us. Ranchlands Equestrian Centre is required to collect this information by our insurance company and by the Department of Workplace Health & Safety. The information you provide will not be supplied to any other organisation or used for any other purpose than that which is stated above.

***I HAVE CAREFULLY READ THIS ACKNOWLEDGMENT AND INDEMNITY. I UNDERSTAND IT, AND VOLUNTARILY AGREE TO ALL OF ITS TERMS. I UNDERSTAND THAT THESE TERMS APPLY TO ME EVERY TIME THAT I PARTICIPATE AT RANGLANDS EQUESTRIAN CENTRE.***

Print Name of Rider ..... Date .....

Signature .....

*If Signature is a parent or guardian – Please print full name below*

Parent/ Guardian Name ...

.....

**CANCELLATION POLICY**

- Failure to attend a scheduled class without notice – **FULL PAYMENT IS REQUIRED**
- **GROUP CLASS** – Under 3 hours’ notice for scheduled class – **FULL PAYMENT MUST BE MADE WITH THE OPTION TO RESCHEDULE FOR ANOTHER TIME**
- **GROUP CLASS** - Short notice - 3 Hours’ and up to 6 days outside of scheduled class time - **\$10 CANCELLATION FEE OR THE CLASS CAN BE RESHEDULED FOR ANOTHER TIME**
- **GROUP CLASS** – We require at least 7 days’ notice of not attending next scheduled class – **NO CHARGE**
- **PRIVATE CLASSES** – We require 24 hours’ notice of cancellation – **NO CHARGE**

**NOTE - On your SECOND lesson we require you to pay a group lesson in Advance of \$65, which is refundable, when you finish here at Ranchlands**

Print Name of Rider ..... Date .....

Signature .....

*If Signature is a parent or guardian – Please print full name below*

Parent/ Guardian Name .....

**Emergency contact, if you are here on your own..**

Name.....

Relationship.....

Phone.....

**PAYING ONLINE**

Would appreciate where you can, to pay for lessons online.

**BEFORE THE CLASS**

BSB 034668 ACC 440407 REF name and date of lesson

And please email bank receipt to jenny\_haines@yahoo.com