

Warlingham & District Horse Club CHARITY RIDE ENTRY FORM

Please send all entries to: Charity Ride Entry Secretary, WDHC 26 Parsonage Lane Sidcup DA14 5HD





& ACCEPTANCE OF THE RULES – INCOMPLETE FORMS WILL BE REJECTED

- 1. I agree to follow the General Rules and Conditions of Entry, including any posted on the day.
- 2. I agree that I will not jump any jumps unless I am accompanied, and will only jump those fences marked and jump only with the red marker to my right if it is clear to do so.
- 3. Lagree to ride in a responsible manner, and Lam aware that under the Health & Safety at Work Act Lam responsible not only for my own safety but also for the safety of others, and Lwill conduct myself in a safe manner at all times.
- 4. Riders under 16 years of age must be accompanied by a responsible person, aged 16 years or over.

I accept the rules and that it is a condition of me attending, that I shall not hold WDHC, it's Officials, Committee or Landowners responsible for injury, death or consequential financial loss to horse or rider. Moreover, with regard to any incident or action in any way related to me or the horse I may be riding, I agree to indemnify and save harmless WDHC, it's, Officials, Committee or Landowners against any claim whatsoever, or by whomsoever made. I confirm that I am covered for personal and third party claims by a reputable insurance company. I accept the refund policy. I agree to the WDHC Privacy Policy (Available to download from the website at) www.wdhc.org.uk Signature of rider	Age (if under 16)	Entry Fee £20 Members £25 For Non members	Optional Charity donation Enclosed	Yes I am a British tax payer & I wish to gift aid my donation (please tick box)	Refund Policy. Please note that this Ride is to raise money for the Charity listed. Refunds are given on production of Doctor or Vet certificate for illness of horse or rider only.	Rider number and tie will be provide d
If Possible I would like a Start Time close to & ride with 						
12.00/12:30. 12.30/13.00 13.00/13.30 (please delete as required) Entrant's Name:		Phone Nu	Imber			
Address:						
Email: If under 16 years, parental signature is required		By entering ye	ou agree that	photographs ma	y be taken and used	d by

WDHC or the professional photographer covering this event

Please note that by ticking the gift aid box (only if you are a British tax payer) the charities can claim an extra 28% on your donation.

www.wdhc.org.uk