



CADENCE HORSE TRAINING – DISCLAIMER FORM

Horse riding/handling can be a high-risk activity. Horses can be unpredictable and may react to their environment, the conduct of riders and other persons. Very occasionally horse riding can involve equipment that may break.

Every precaution has been taken to minimize associated risks. If you choose to ride or handle horses, *Cadence Horse Training* accepts no responsibility for injury or damages occurring on the property or during offsite sessions.

Name of rider/handler: _____

Address: _____

Telephone Number: _____

Email address: _____

Age (If under 18): _____

Parent/Supervisor signature (If under 18): _____

Emergency Contact Name and Telephone Number: _____

Medical Precautions

The following information is confidential and intended only to assist *Cadence Horse Training* in case of emergency.

Do you have any pre-existing medical condition or disability that may place you or any member of *Cadence Horse Training* staff at risk?

Yes No Details: _____

Are you on any Medication?

Yes No Details: _____

Are you pregnant?

Yes No

PLEASE SEE OVERLEAF

Please circle if you suffer from any of the following:

Asthma Diabetes Seizures Heart Condition Dizzy spells

Migraines Blackouts Hay Fever

Any Other _____

Year of last Tetanus (Within last 5 years): _____

Consent to Medical Attention

Where the person in charge is unable to contact the emergency contact listed, I authorize the administration of first aid and/or an ambulance to be called if judged to be reasonably necessary.

Signature of Rider: _____ Date: _____

Parent / Guardian / Supervisor signature (if under 18): _____