

To secure a place in one of our camps, please complete this form and return to us with a deposit of \$100.00.

ENTRY FORM FOR THE CAMP DATED ..... to .....

NAME .....

ADDRESS .....

..... p/code .....

TELEPHONE ..... MALE/FEMALE & AGE .....

IS/IS NOT BRINGING OWN HORSE ..... HORSE'S NAME .....

**TERMS & CONDITIONS**

I have read, understood and signed the application to ride attached.

Signed ..... dated .....

**MEDICAL TREATMENT**

**Name and telephone numbers of contact people**

Mother's Full Name: .....

Contact Telephone Numbers:

Home: ..... Work: ..... Mobile: .....

Father's Full Name: .....

Contact Telephone Numbers:

Home: ..... Work: ..... Mobile: .....

Additional Emergency Contact Person's Name: .....

Relationship to rider: .....

Contact Telephone Numbers:

Home: ..... Work: ..... Mobile: .....

**Medicare Number:** .....

**Name of Family Doctor:** .....

Contact Telephone Number .....

Please circle if your child suffer from any of the following:

Asthma      Diabetes      Fits of any type      Heart condition      Dizzy Spells      Migranes  
Blackouts      Uneven Pupils.

Other.....

**Allergies**

Name of drug.....

Name type of food.....

Describe reaction.....

**Tetanus Immunisation**

It is particularly important that people dealing with horses are immunised against tetanus. Tetanus is normally given at five years of age as Triple antigen or CDT and at fifteen years of age as ADT. Year of last tetanus immunisation.....

**Medication**

Is it necessary for your child to carry their own medication at all times.

Name of drug:..... Dosage..... Frequency.....

**Consent To Medical Attention**

I authorize the instructor in charge to administer first aid and call an ambulance if necessary for the medical attention of my child.

I agree to bear any cost thereby incurred. ....

Signed

**Ambulance**

Covered Yes/No      Expiry Date .....      Membership No. ....

**Private Health Insurance**

Name of company:..... Type of cover:.....

Office Use only	Deposit	Confirmed	Balance	Paid