

Summer Camp Booking Form

South of England Showground, Ardingly

28th, 29th, 30th August 2024

Please return the completed form by email to: <u>Eridge@PCUK.org</u> or at the Parents' Meeting on 2 February 2024 together with a £50.00 deposit paid by bacs to the Eridge Pony Club Account, Sort Code: 40-52-40, Account Number: 00022251, reference: "Member's surname AND Camp"

Name of Rider:	
Age of Rider:	D.O.B
Rider's Address:	
Contact details of parent/guardian:	
Name	
Email address:	
Telephone numbers to call whilst child at can	np:
Home:	
Mobile:	
Does your child suffer from any allergies?	Y/N
Does this require medication?	Y/N
If yes, please detail	
Is your child a Vegetarian/Vegan?	Y/N

Any Medical history /problems we should be aware of? (including any details of any medication) Y/N Has your child been to camp before? Is your child confident in tacking up / handling the pony? Y/N Any specific issues? Pony Name: Age of Pony Height of Pony: Does the pony normally live out/part stabled/fully stabled? Please give information on general temperament, habits, vices eg biting, cribbing, sensitive when being tacked up, barging, susceptible to bouts of colic, history of laminitis which may be relevant during camp: Has this pony been to camp before? Y/N How long has your child been riding this pony? What height is your child/pony jumping? I hereby authorise Eridge Pony Club Committee members to sign any forms required by a Health authority before undertaking any medical treatment (including operations or anesthetics) for my child. Name of child I also agree to any emergency veterinary decisions for treating the above named pony should it become necessary. Print name in full: Date: