



## Pensacola Riding Center Registration Form and Agreement

Rider's name \_\_\_\_\_ second rider's name \_\_\_\_\_  
*First Last First Last*

phone \_\_\_\_\_  
*home cell*

Mailing Address: \_\_\_\_\_  
*Street address City State zip code*

Email address: \_\_\_\_\_

*Date of birth & age* \_\_\_\_\_ *Grade* \_\_\_\_\_ *school* \_\_\_\_\_ Weight (over 240lb) \_\_\_\_\_

Does the rider have at least 10 hours of formal English Horse Riding Experience? \_\_\_\_\_

Describe \_\_\_\_\_

Does this rider have physical and/or mental health conditions, problems, and/or disabilities which may affect his/her safety and ability to ride a horse? "If yes", describe here

Second rider (if applicable)

*Date of birth & age* \_\_\_\_\_ *Grade* \_\_\_\_\_ *school* \_\_\_\_\_ Weight (over 240lb) \_\_\_\_\_

Does the rider have at least 10 hours of formal English Horse Riding Experience? \_\_\_\_\_

Describe \_\_\_\_\_

Does this rider have physical and/or mental health conditions, problems, and/or disabilities which may affect his/her safety and ability to ride a horse? "If yes", describe here

*Emergency contact* \_\_\_\_\_ *relationship* \_\_\_\_\_

Emergency contact phone numbers \_\_\_\_\_  
*Home cell work*

Mother's name (if rider is under 21) \_\_\_\_\_

Mother's phone \_\_\_\_\_  
*Home cell work*

Mailing address \_\_\_\_\_  
*Address City State zip code*

Mother's email \_\_\_\_\_  
*Primary other*

Father's name (if rider is under 21) \_\_\_\_\_

phone \_\_\_\_\_  
*Home cell work*

Mailing address \_\_\_\_\_  
*Address City State*



Riding Center advises pregnant women not to ride horses, unless permission is given under advice of her physician.

(Initial rider \_\_\_\_\_ parent or guardian \_\_\_\_\_)

6. **CONDITIONS OF NATURE** – I understand that: Pensacola Riding Center is not responsible for total or partial actions that can scare a horse cause it to fall, or react in some other unsafe way. Some examples are: thunder; lightning; rain; wind; water; wild and domestic animals; insects or reptiles which may walk, run, or fly near, or bite or sting a horse or person; and irregular footing on out-of-door groomed or wild land which is subject to constant change in condition according to weather, temperature, natural and man-made changes in landscape.

(Initials) rider \_\_\_\_\_ parent or guardian \_\_\_\_\_

7. **CARRY-ON OBJECTS AND SHARP NOISES** – I understand that: Riders must not carry loose items on rides which may fall, blow away, flap in the wind, bounce, or make sharp noises, possibly scaring a horse. Some Examples are: cameras; hats not securely fastened under chin; toys; or purses. Riders must not make sharp or loud noises, such as screaming or yelling, which may scare a horse.

(Initials) rider \_\_\_\_\_ parent or guardian \_\_\_\_\_

8. **SADDLE GIRTHS – NATURAL LOOSENING** – I understand that: Saddle girths (saddle fasteners around horse’s belly) may loosen during a ride. If a rider notices this, he/she must alert the nearest teacher/instructor as quickly as possible so action can be taken to avoid slippage of saddle and a potential fall from the animal.

(Initials) rider \_\_\_\_\_ parent or guardian \_\_\_\_\_

9. **ACCIDENT/MEDICAL INSURANCE** – I agree that: Should emergency Medical treatment be required, I and/or my own accident/medical insurance Company shall pay for ALL such incurred expenses.

(Initials) rider \_\_\_\_\_ parent or guardian \_\_\_\_\_

My accident/medical insurance company is: \_\_\_\_\_

And my policy number is: \_\_\_\_\_

10. **PROTECTIVE HEADGEAR OFFERING** – I, for myself, and on behalf of my child and/or legal ward, have been offered protective headgear (riding helmet) by Pensacola Riding Center and do understand that the wearing of such headgear while mounting, riding, dismounting and otherwise being around horses, may prevent or reduce severity of some head injuries, and may even prevent death happening as the result of a fall or other occurrence. It is understood that stable provided protective headgear may not be of perfect fit for each rider’s head, and that once provided, I/we will be responsible for securing the helmet on this rider’s head at all times.

Mark an “below in the box before the statement, which describes your choice to wear stable-provided protective headgear or your own headgear:

{ } I/we request to wear protective headgear which Pensacola Riding Center provides.

{ } I/we agree to provide my/our own protective headgear.

I, for myself and on behalf of my child and/or legal ward understand that per Florida Statute, a child who is younger than 16 years of age must wear a helmet that meets the current applicable standards of the American Society of Testing and Materials for protective headgear used in horseback riding and that is properly fitted and fastened securely upon the child’s head by a strap when the child is riding an equine upon: (a) A public roadway or right-of-way; (b) A public equestrian trail, public recreational trail, public park or preserve, or public school site; or (c) Any other publicly owned or controlled property.

A parent or guardian of a child younger than 16 years of age may not authorize or knowingly permit the child to violate this section. A person who violates subsection (3) or subsection (4) commits a noncriminal

