



NAR VALLEY BLOODHOUNDS COUNTRYSIDE RIDE



ENTRY FORM

Name	Birthday	
Address		
Telephone	Home	Mobile
Email		
Emergency contact	Name	
Telephone	Home	Mobile
Name of Account making online payment		
Date of online payment		

Please tick the box for your estimated time of arrival

- ☐ 9-10
☐ 12-13

Disclaimer

In attending the event with the Nar Valley Bloodhounds, I acknowledge that riding is a risk sport. I will not hold the Nar Valley Bloodhounds, its Masters, officials, helpers 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 the Nar Valley Bloodhounds, its Masters, officers, helpers 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.

Signed.....Date.....

Signed (Parent/Guardian).....Please print.....

If rider is under 18 years of age the signature must be endorsed by a parent or guardian

Please complete and return to: narvalleybloodhounds@gmail.com