

2009 Pony Racing Entry Form

Race Details:	Venue: Date: Race Distance: 138cm & Under / 148cm & Under (please delete as applicable)	
Rider Information:	Name: Date of Birth: Age at 01/01/09: Rider Weight: Hunt / Pony Club Branch:	PRA Membership Number: Age on Day of Race: <i>(required to ensure full and correct medical provision)</i>
Qualification:	Rider	Pony
Please clearly list date and venue of Hunt Meets, Pony Club Rallies or Pony Club Raceday (with finishing position) attended since 1 st November 2008 for the Rider <u>and</u> Pony	1) 2) 3) 4)	1) 2) 3) 4)
Pony Information:	Name: Height: Colour:	Age: Breed/Type: Mare / Gelding
Rider Silks:	Body Colour: Arms Colour: Hat Colour:	Body Pattern: Arms Pattern: Hat Pattern:
Contact Details:	Address: Postcode: E-mail: Emergency Contact Number:	
		Telephone

Photographic Rights – competitors and their guardians hereby give permission for any photographic and/or film or TV footage taken of persons or horses/ponies taking part in the Pony Races to be used and published in any media whatsoever for editorial purposes, press information or advertising by or on behalf of The PRA, Masters of Foxhounds Association, PPSA or the organisers of the Point-to-Point. Competitors and their guardians consent to the organizers providing information that they may think will be of benefit. This may be done by post, by fax, by e-mail or via websites. If you do not wish to receive this information, please tick the box below.

Parent Entry Declaration

In making this Entry I agree on behalf of my child and my family to be bound by The PRA and PPA POINT-TO-POINT PONY RACING Regulations 2009 and that no liability will be accepted by The PRA, MFHA, PPA, the Racecourses and organisers or anyone acting on their behalf for loss, damage, accident, injury or illness to pony, rider or property whatsoever. I am aware that it is **NOT** the responsibility of the organisers to have in place any personal accident insurance for participants and that it is MY responsibility to make the necessary arrangements if such cover is required.

Signed..... Name please print name
 Date..... I do not wish to receive information from The PRA, PPSA or Pony Club that they think may be of benefit to me. Please tick box.

Hunt Secretary / Master or District Commissioner Declaration

I confirm that the above details are true and correct and that (Rider) and (Pony) have attended a minimum four hunt meets / Pony Club Rallies since 1st October 2008 and today's date and are qualified to compete in 2009 Pony Races. Parental / guardian permission for them to compete has been given and to the best of my knowledge the pony and rider are eligible and competent to compete a Pony Race.

Signed..... Name..... please print name
 Hunt Secretary/Master for..... Hunt/Harriers/Bloodhounds/Draghounds/ Pony Club
 Address.....
 Date.....

Parental / Guardian Declaration:

I confirm that I want my son/daughter (full name)..... to enter and be permitted to ride his/her Pony (name) and participate in the above event but I confirm on my own behalf and on behalf of my son/daughter that I recognize that riding including riding at speed in company of other children and ponies, albeit not over fences, is an activity with considerable attendant risks and that whilst organisers of the above event both personally and through their officials and employees will endeavour to reduce risks to those participating, it cannot be guaranteed either the arrangements put in place will have been fully complied with or that some human error or unexpected animal behaviour will not occur with potentially disastrous consequences for those participating and watching the event. I accept that it is a condition of Entry that the rider will do his/her best to conduct him/herself safely and to ride his/her pony in such a way as to minimize risk of injury to him/herself and to other riders, their ponies and spectators. I have impressed the need for good and sensible behaviour on my son/daughter and have checked his/her pony, tack and other equipment to ensure that all is in order and that nothing about the pony, tack or other equipment presents a danger to my son/daughter or to other riders or ponies participating in the race or to the organisers, officials, employees or others watching the race. In particular, I shall ensure that my son/daughter complies with all requirements as published by the organisers of The PRA, Racecourse, Point-to-Point, the PPA and the MFHA. Accordingly in the event of injury or death to any pony

ridden by my son/daughter whether due in part or in full to any error, neglect or default on the part of the organisers, their officials or employees. I will not hold the organisers, officials or their employees responsible for such injury or death or any consequential expenses. I further agree that it is my sole responsibility to arrange or effect insurance cover in respect thereof and to indemnify and hold harmless the organisers of the event, their officials or employees against any claim or claims made by the owner of any pony ridden by my son/daughter, if such pony has been lent or hired for the purpose. I agree that by taking part in Pony Racing my son/daughter is required to use physical skills and judgement to a very high order. Any failure in an individuals performance may not only put his/her life in danger but also put others participating at risk of injury, disablement or death. Whilst recognising that a full medical examination is impractical, there are a number of conditions that will preclude a child from taking part. I declare that my son/daughter complies with the following:

1. Is not currently being prescribed regular medication.
2. Has never suffered from epileptic fits or convulsions.
3. Does not suffer from diabetes.
4. Does not suffer from chronic asthma that requires oral steroids or other medication other than an inhaler.
5. Does not suffer with impaired eyesight or hearing.
6. Has not suffered a dislocation of the shoulder on more than one occasion.

By signing this declaration I declare that my son/daughter is fit and competent to take part in the Pony Race at the above venue on the above date. I have no knowledge of any other medical information that would preclude him/her from taking part.

Signed.....Mother/Father/Legal Guardian* (*Delete as appropriate)

Name..... please print name

Date.....