



# NORTH STAFFORDSHIRE BRIDLEWAYS ASSOCIATION

## RIDE ENTRY FORM



RIDERS NAME .....

ADDRESS .....

POST CODE .....

TEL NO .....

MOBILE NO .....

RIDE NAME .....

RIDE DATE .....

MEMBERSHIP NO ..... NON-MEMBER .....

HORSE NAME .....

TRANSPORT    CAR  4 x4  LORRY

SHARING WITH .....

**I.C.E** NO .....  
 (Telephone no. of person to contact **In Case of Emergency**)

**EMAIL** – IF YOU WISH TO HAVE RIDE DETAILS SENT BY EMAIL  
 PLEASE SEND REQUEST TO:- **jude.sockett@btinternet.com**

**DISCLAIMER OF LIABILITY:** Save for the death or personal injury caused by the negligence of the organisers, neither the organisers, the NSBA, nor any representatives of these parties accept liability for any accident, loss, damage, injury or illness to horse owners, riders, spectators, landowners or any other person or property whatsoever, whether caused by their negligence, breach of contract or in any other way whatsoever.

**HEALTH AND SAFETY:** The organisers of this event have taken reasonable precautions to ensure the health and safety of everyone present. For these measures to be effective, everyone must take all possible precautions to avoid and prevent accidents occurring and must obey the instructions of the organisers and stewards.

**PUBLIC LIABILITY INSURANCE:** You must have public liability insurance to enter this event.

Do you have public liability insurance? .....

INSURANCE COMPANY .....

POLICY NUMBER .....

ENTRY FEE £ .....ENCLOSED      SIGNED.....      DATE.....