

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	
10 - 11	
11 – 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. Should you not be able to attend giving less than 24hrs notice there shall be no refund.	
Signed	Date
Signed (Parent/o	Guardian)Please print

Please complete and return to: narvalleybloodhounds@gmail.com