

# KELLS EQUESTRIAN CENTRE

## Pony Camp Application Form

<b>Name:</b>	
<b>Address:</b>	
<b>Age:</b>	
<b>Date of birth</b>	
<b>Tel No:</b>	

<b>Does your child suffer from any allergies?</b>	
<b>If so please state:</b>	
<b>Is your child under any form of medication?</b>	
<b>If so please state:</b>	

In the event of some problems or difficulties during camp, it may be necessary to contact a child's Parents or Guardians. In the event of such an occurrence state whom to be contacted.

### Parent or Guardian Contact Information

<b>Name:</b>	
<b>Tel/Mobile No.</b>	

### Furnish details of Family Doctor

<b>Name:</b>	
<b>Address:</b>	
<b>Telephone No:</b>	

To: Kells Equestrian Centre

**I acknowledge and accept that riding is a risk sport.**

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

#### Camp Requisites:

- Riding Hat
- Jodhpurs
- Boots
- Whip
- Gloves
- Rain Coat
- Packed Lunch

Return completed application forms to:

**Kells Equestrian Centre**  
Normanstown  
Carlanstown  
Kells  
Co. Meath  
Tel: 046.46998  
Fax: 046.46024