

**PERMISSION FORM FOR ATTENDANCE AT ZONE 16
CAMP 2016
(MUST BE COMPLETED AND SIGNED BY PARENT/GUARDIAN)**

RIDER

I am willing for _____ to attend the
Zone 16 Pony Club Camp from Sunday 10th April – Saturday 16th April 2016.

I have read the conditions of the camp and agreed to abide by them. My child/children attending camp
are current financial member/s of _____ Pony Club.

Cheque payable to my Pony club enclosed for \$ _____
Cheque covers the following:

Riders (how many, any led?) _____
Meal ticket(s) (please include name of parent for led riders) (whose name is the ticket too made out in, no
need to add rider info)

Camping (how many sites) _____
Instructors horse(s) (how many) _____
Helper all week info _____
Any other payments _____

I/WE AUTHORISE AND DIRECT IN THE EVENT OF AN ACCIDENT OR ILLNESS THAT YOU
OBTAIN FOR MY CHILD SUCH MEDICAL CARE -INCLUDING ANAESTHETISATION AND
BLOOD TRANSFUSION AS SHALL BE NECESSARY.

Parent/Guardian Signature: _____

Printed Name: _____

SIGNATURE OF CLUB INSTRUCTOR _____

Please ensure Rider/Horse/Grades/Experience are correct (please add info you wish the ZCI to be aware
of)

NAME OF VETERINARIAN (if required)

I, _____ parent of _____
authorise the

camp commandant to engage the services of _____ veterinary
surgeon if in his opinion this is warranted for my child's horse. In signing this permission slip **I accept
responsibility for fees incurred.**

Parent/Guardian Signature _____

Printed Name _____

Date _____