

EPPING FOREST HORSE RIDING REGULATIONS LICENCE SCHEME 2023 - 2024

APPLICATION FORM - PLEASE COMPLETE IN BLOCK CAPITALS

TYPE OF LICENCE REQUIRED Please Tick Boxes

ANNUAL		WEEKLY		
ADULT		ADULT		
JUNIOR (Under 16)		JUNIOR (Under 16)		
An annual license can include up to 2 additional riders on the same disc number				

MAIN RIDER:

Title				
First Name				
Surname				
Home Address				
Town				
County				
Postcode				
Contact Tel No				
E-mail Address				
DETAILS OF OTHER RIDERS:				
Name, Address, Tel No, E-mail		Name, Address, Tel No, E-mail		
Rider 2:		Rider 3:		
All horse riders must have public liability insurance. Can you confirm you have this and provide proof? (NOTE: no licence will be issued if you cannot provide proof)				
YES NO				
Please indicate if your horse has been microchipped:				
YES NO	D			

FULL DESCRIPTION OF HORSE

COLOUR				
TYPE/BREED				
HEIGHT				
MARKINGS				
MARE/GELDING/STALLION				
NAME OF HORSE				
FULL ADDRESS OF WHERE HORSE IS STABLED				
EMERGENCY CONTACT DETAILS – Who do we call if you have an accident?				
Please give Name, Contact Telephone Number & Address				
The disc is to be displayed on the visibly on the horse at all times				
I apply for a licence under the additional byelaws for the regulation of horse riding in Epping Forest and				
enclose payment of £				
Main and alia and sing advisor	CARD PAYMENTS ONLY			
Main applicant signature				
Parent/Guardian for Junior Applicant				
The completed form must be returned with the appropriate fee to: Horse Riding Licence Applications Chingford Golf Course Bury Road, Chingford, E4 7QJ Any further enquiries please contact The Golf Course on Tel: 020 8529 2085				
If you require the disc to be posted to you, please note that there is an additional administration / postage charge of £3.95				
Information provided to us through this licence application form, will be used to assist us in protecting the open spaces in accordance with the City of London (Open Spaces) Act 1878, and may be used for other City of London purposes. Any personal data provided on this form will be processed in accordance with the Data Protection Act 1998.				
OFFICE USE ONLY Date: / /				
Payment of £ received by Crea	dit or Debit Card			
Licence Number Issued: S:				
Disc Issued in Person / Disc posted on Date				
Staff Name:				
Copy of PLI received:				