



EQUESTRIAN WORLD CLASS PROGRAMME
EQUINE PATHWAY (DRESSAGE)
SELECTION/ASSESSMENT APPLICATION FORM
2016 - 2017



Please note that applications must be signed by the owner of the horse and the athlete who it is proposed will ride the horse in the course of the programme.

PLEASE COMPLETE IN BLOCK CAPITALS

ATHLETE DETAIL		
SURNAME:		CHRISTIAN NAME:
DATE OF BIRTH:		BD REGISTRATION NUMBER:
FEI NUMBER (if known):		NATIONALITY:
ADDRESS:		
POSTCODE:		E MAIL:
HOME TELEPHONE:		MOBILE:
HORSE DETAIL		
REGISTERED NAME:		STABLE NAME:
SEX:	YEAR FOALED & AGE:	BD NUMBER:
SIRE:		DAM:
OWNER DETAIL		
OWNER'S NAME:		BD REGISTRATION NUMBER:
ADDRESS:		
POSTCODE:		E MAIL:
HOME TELEPHONE:		MOBILE:
COACH DETAIL		
NAME:		E MAIL:
HOME TELEPHONE:		MOBILE:
How long have you trained with this coach		



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TRAINING / COMPETITION DETAIL
TEST TO BE RIDDEN (as per Selection / Assessment Policy):
LEVEL HORSE IS CURRENTLY TRAINING AT:
In the following section please delete as appropriate
Able to demonstrate half steps/piaffe with or without help from the ground: WITH WITHOUT
Able to demonstrate passage with or without help from the ground: WITH WITHOUT
Able to demonstrate canter pirouettes: FULL WORKING
FREQUENCY OF TRAINING SESSIONS:
ANY OTHER RELEVANT INFORMATION:

PLEASE SIGN AND COMPLETE THE FOLLOWING SECTION

I confirm that the information given by me on this form is correct to the best of my knowledge. I also certify that I have read and understood the Equestrian World Class Programme Equine Pathway (Dressage) Selection & Assessment Policy 2016/17.

Signed (Athlete):	Print (Athlete):	Date:
Signed (Owner):	Print (Owner):	Date:

Owners: Please note that by signing you agree to your horse's participation in the programme on the terms outlined in the selection/assessment policy. In the absence of any communication from you to the contrary we will act on the basis that the athlete has your authority to take part on your horse and to take all relevant decisions in relation to the horse.

Please insert your e mail address below if you wish communications in relation to the programme to be sent to you as well as the athlete

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Data Protection:

The British Equestrian Federation and the discipline member body to which your application relates (the "Member Body") undertake to respect the privacy of the individual and have implemented strict procedures to protect the individual's rights under the Data Protection Act 1998. By submitting this application you consent to the British Equestrian Federation and/or the Member Body holding, processing and disclosing your personal information (including sensitive personal data within the meaning of the Act) for the purposes of efficiently administering the British Equestrian Federation's and/or the Member Body's business and in order to process your application. Personal data will only be disclosed to third parties, unless required by law, with the consent of the individual concerned. Please note that information supplied to the British Equestrian and/or the Member Body for the purposes of your application and may be retained in a confidential file for a maximum period of three months following the end of the Selection/Assessment period and will be securely disposed of thereafter.

Application form should be returned no later than Thursday 13 October 2016 to:

Lianne Martin, British Dressage, Meriden Business Park, Copse Drive, Meriden, West Midlands CV5 9RG

Tel: 02476 698835 Email: : <mailto:lianne.martin@britishdressage.co.uk>

