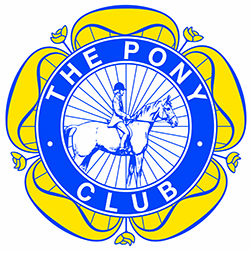
**Celyn Polocrosse Club**

**PONY CLUB POLOCROSSE TRAINING DAY**

**At Northop College (part of Coleg Cambria), Holywell Rd, Northop, Flintshire CH7 6AA**

**Saturday 30th January 2016, from 10.30am – 2.30pm**

Celyn Polocrosse Club are running a day of polocrosse training at the Northop College arena, open to all Pony Club members no matter what your age or ability. All coaches will be UKCC accredited, so come along and give this exciting sport a try! Players will be grouped by experience.

Sticks are available to borrow; all your pony will need is bandages and over reach boots on all four legs and a breastplate.

**£20 per player, to be paid on the day.**

To book your spot please complete the details below and return to [anna@celynpolocrosse.co.uk](mailto:anna@celynpolocrosse.co.uk) by Monday 25th January. If you need to borrow a stick please let us know on booking.

Directions to Northop College can be found at [www.celynpolocrosse.co.uk](http://www.celynpolocrosse.co.uk) .

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Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age: \_\_\_\_\_\_\_\_\_\_ Branch: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

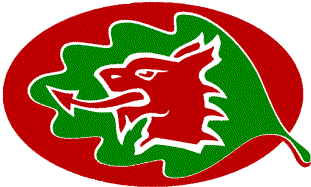
Height of Horse/Pony: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

At what level have you played before (if at all): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any medical conditions or allergies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Payment by cash or cheque on the day.***

***Please make any cheques payable to Celyn Polocrosse Club.***

**CELYN POLOCROSSE – PLAYER DETAILS**

**Section A** (not required for Celyn Players)

PLAYER NAME: ..…………………………………………………………………………………

AGE (as at 1st Jan): ……………………………… Today’s Date: …………………………….

Any Medical conditions which may affect you while playing or practising polocrosse on foot or on horseback?

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**RISK STATEMENT**

**Polocrosse is classed as a *RISK SPORT* such that there remains a risk of serious injury while playing the sport. Injuries may occur while you are practising or competing both on horseback and on foot.**

**All persons taking part in, or as spectators of, Celyn/UKPA activities do so at their own risk.**

**The UKPA and Celyn club, their officers and agents accept no liability for loss, damage or injury to persons, animals or property other than that required by statutory legislation.**

**By signing below (or signing on behalf of a junior) you are accepting the above Risk Statement for yourself and/or the player**

Signed: ………………………………………. Print Name:……………………………………….

**Section B – For all Players Under the Age of 18 years on the Day** (for all as applicable)

If the player is not to be accompanied by their parent/guardian then please declare here the adult designated with on-site responsibility:

…………………………………………………………. …………………………………………….

Signed: ………………………………………. Print Name:……………………………………….