



BHRC SADDLE LICENCE APPLICATION

(All questions must be answered in full)



Title (Mr, Mrs, Miss, Dr, etc): _____ Date of Birth: _____

Surname: _____ Maiden Name (if applicable): _____

Forename(s): _____

BHRC Licence No (if applicable): _____

Height: _____ Eye Colour: _____

Address: _____

_____ Post Code: _____

Contact No: _____ Email: _____

Stable Name and Address (if different from above): _____

_____ Post Code: _____

Have you held a BHRC licence previously? If yes, please give details: _____

Have you ever had any licences suspended, cancelled or withdrawn? If yes, please give

details: _____

Do you own any Harness Race Horses? If yes, please give details: _____

Have you any sight or hearing impairment? _____

When and where have you obtained riding experience? _____

During the last five years have you had a criminal conviction against you or served a term of imprisonment, or have you ever been undischarged bankrupt YES/NO

If yes please give details:

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We certify that in our considered opinion

NAME (of applicant): _____

*has completed a qualifying saddle race and is sufficiently competent to be granted
a Saddle Licence*

TRACK: _____

HORSE: _____

QUALIFYING TIME: _____ DATE: _____

Signed:

1. _____

Print Name: _____ Track Steward of: _____

2. _____

Print Name: _____ BHRC/Regional Steward

APPLICANT:

Data Protection Act -

The BHRC may from time to time like to share telephone information with like minded individuals or organisation, e.g. a new supporter may wish to be put in touch with someone in their area or a local trainer. If you would prefer us NOT to disclose your particulars to anyone else, do please let us know by ticking this box

I hereby declare that the answers given are true and correct in every detail

I declare that I know of no reason for the BHRC to refuse to issue such a licence

In applying for this licence I agree to abide by the Rules and Regulations of the BHRC

Print Name: _____

Signature: _____ Date: _____

**** PLEASE NOTE THE BHRC ARE PAPERLESS LICENSING FROM 2012 ****
(Licences will be emailed if a valid email address is provided)