



Junior Academy Application Form 2019

Please complete this form in full and we will contact you when suitable training opportunities arise.

RIDER INFORMATION

Surname:		Age:	
First Name:		Date of Birth:	
Address:			
County:			
Name of School:		Year:	
Have you attended RACE before? Yes <input type="checkbox"/> No <input type="checkbox"/> Details:			
If you attended a previous Junior Academy, which level: 1a 1b 2 3 (if you remember)			
Previous Experience (circle):			
Show Jumping Pony Club+ Branch: _____ Hunting Hunter Trials			
Trainer's Yard+ Name: _____ Riding School lessons Other: _____			
No. of years riding experience: 1-2 years 3-4 years 5-6 years 6+ years			
No. of years riding thoroughbreds: None 1-2 years 3-4 years 5-6 years			
Walk Rising Trot Trot without stirrups Sit in Canter Jump > 50cms Jump > 90cms Control strong pony Tack up unaided			
Pony Racing Experience (if applicable)		Year started pony racing	Number of rides
I ride up to:	12.2hh	13.2hh	14.2hh
			15hh
			15hh+
I ride my own pony/horse <input type="checkbox"/>		I ride for other owners only <input type="checkbox"/>	
		I ride my own pony/horse and for other owners <input type="checkbox"/>	

PARENT/GUARDIAN INFORMATION:

Name	
Phone Number	
Email Address	

Submit by E-mail: enquiries@racingacademy.ie or post: Junior Academy, RACE, Curragh House, Dublin Road, Kildare