

AL SHAQAB SUMMER CAMP



APPLICATION FORM

ATTACHMENTS

One copy of Qatar ID/Passport or copy of Residence Visa of applicant and Parent/Guardian is required as applicable.

PERSONAL INFORMATION

FULL NAME:		
DATE OF BIRTH:	GENDER (M/F):	NATIONALITY:
ADDRESS:		
E-MAIL ADDRESS:	MOBILE NO:	

EMERGENCY CONTACT DETAILS

NAME:	RELATIONSHIP WITH THE RIDER:
E-MAIL ADDRESS:	
CONTACT NUMBER:	OTHER CONTACT NUMBER:

RIDING EXPERIENCE (PLEASE TICK)

First Time Beginner Intermediate Advance

IF YOU ARE A BEGINNER OR AN INTERMEDIATE RIDER PLEASE TICK BELOW

Walk Trot Canter Jump <1m Jump >1m

Date Last Rode: _____

Duration of the Camp 5 Weeks (From 22 June to 25 July 2019)

AGE

GROUP 1: 3 - 7 Years Old

GROUP 2: 8 - 17 Years Old



PREFERRED TIME (PLEASE TICK)

WEEK 1

22 - 27 June

- 08:15 - 09:00 am
- 09:15 - 10:00 am
- 10:15 - 11:00 am
- 11:15 - 12:00 pm
- 12:30 - 01:15 pm
- 01:30 - 02:15 pm

WEEK 2

29 June - 4 July

- 08:15 - 09:00 am
- 09:15 - 10:00 am
- 10:15 - 11:00 am
- 11:15 - 12:00 pm
- 12:30 - 01:15 pm
- 01:30 - 02:15 pm

WEEK 3

6 - 11 July

- 08:15 - 09:00 am
- 09:15 - 10:00 am
- 10:15 - 11:00 am
- 11:15 - 12:00 pm
- 12:30 - 01:15 pm
- 01:30 - 02:15 pm

WEEK 4

13 - 18 July

- 08:15 - 09:00 am
- 09:15 - 10:00 am
- 10:15 - 11:00 am
- 11:15 - 12:00 pm
- 12:30 - 01:15 pm
- 01:30 - 02:15 pm

WEEK 5

20 - 25 July

- 08:15 - 09:00 am
- 09:15 - 10:00 am
- 10:15 - 11:00 am
- 11:15 - 12:00 pm
- 12:30 - 01:15 pm
- 01:30 - 02:15 pm

PAYMENT & FEES

1000 QAR Per Week

Fee payable in full at registration to secure your place (no telephone bookings) Non-refundable in the case of non-attendance.

PHOTO RELEASE

I hereby authorize the use and production of any and all photographs and other audio visual materials taken of me/my children, my ward by Al Shaqab for promotional printed materials, educational activities or for any other use for the benefit of the program.

AL SHAQAB EQUINE EDUCATION WAIVER AND RELEASE

I, _____, release and forever discharge AL SHAQAB from any and all liability, claims and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from the activities I or my child is engaged in at AL SHAQAB with respect to bodily injury, personal injury, illness, death or property damage that may result while I or my child is on Al Shaqab site.

Furthermore, I agree to abide by the Code of Conduct and General Terms and Conditions set forth by Al Shaqab.

By signing below, I confirm that I have read and understood all the contents mentioned in the Equine Education Department Summer Camp Application Form and thereby enter into this release willingly and voluntarily.

Signature Parent /Guardian (For children under 18 years)

Date

