THE UMMED INTERNATIONAL SCHOOL

HORSE RIDING CONSENT FORM

The Principal
The Ummed International School

UNDERTAKING

1. I hereby allow my son/daughter....., Scholar No. ....., Class ....., Section....., House..... to join the School Riding Academy.

2. I understand that once my ward joins the School Riding Academy, he/she will be charged for the entire / full term as per the details mentioned underneath.

   a. 1st Term (From April to September) - Rupees 10,000/-

   b. 2nd Term (From October to March) – Rupees 10,000/-

3. I also agree to provide the complete Riding Kit and all accessories including safety kit required for Riding, as specified by the School's Riding Instructor.

4. I undertake complete responsibility of any mishap/accident/injury that may occur during Riding.

5. I hereby agree that The Ummed International School, its Management or Employees will not be held responsible in any way, in case of any mishap / accident / injury. I also agree that I will not claim any compensation, whatsoever, from the school, its Management or Employees in case of any accident.

_____ _____

Signature of Father

Name:

Address:

Mob No.:

Signature of Mother

Name:

Address:

Mobile No.: