



SUN VALLEY STABLES

Plot 44
Corner Mane Road & Coach Lane
Sun Valley
P O Box 30745 Kyalami 1684
Tel: 082-571-0309
Fax: 086-503-2854
Email: kitence@iburst.co.za

SUN VALLEY STABLES & WATERSIDE STUD

Young Horse Indemnity Form

PUPIL'S FULL NAME _____
DATE OF BIRTH _____
MOTHER'S NAME _____
IDENTITY NUMBER _____
FATHER'S NAME _____
IDENTITY NUMBER _____
RESIDENTIAL ADDRESS _____
POSTAL ADDRESS _____
TELEPHONE NUMBERS HOME _____ CELL _____
MOTHER: WORK _____ CELL _____ FAX _____
FATHER: WORK _____ CELL _____ FAX _____
EMAIL ADDRESS _____
MOTHER EMAIL _____
FATHER EMAIL _____
NEXT OF KIN: HOME _____ CELL _____ WORK _____
MEDICAL AID & MEMBER NUMBER _____
ALLERGIES AND/OR _____
IMPORTANT INFORMATION _____

GENERAL INDEMNITY

I, _____ agree to allow my child _____
to ride and work with young horses of the Waterside Side Stud at Sun Valley Stables. These horses are 8
years old and under and have been under saddle for less than 2 years making them slightly
unpredictable. I will hold neither the owner of the property, her agents and employees, nor any member
of her family responsible for any loss or damage that may occur whatsoever.

Signed this _____ day of _____.

Signature of Parent/ Guardian