

## Carriage Driving Venue Assessment

Please tick the appropriate assessment:

- New Group  
 Group Moved Venue

Date:

### Group Details

Name:	Contact Number:
Venue Address:	Region:
Email Address:	Regional Driving Rep:

### Assessor Comments

### Assessment

*By completion of the CD Assessor*

**Assessor Name:**

**Assessor Signature:**

**Date:**

**When completed please email this form to the Coaching Team [coaching@rda.org.uk](mailto:coaching@rda.org.uk).  
Please also copy to your Regional Carriage Driving Representative and retain a copy for the  
Group.**



## Driving Area

*(Check all areas that apply and provide details below)*

Indoor School – Surface & Size:

Outdoor School – Surface & Size:

Field – Size & Type:

Gates:

Equipment Type:

Other (specify):

## Mounting and Dismounting Area

*(Circle which apply and provide details below)*

Is the area level? (Yes/No):

Is it enclosed? (Yes/No):

## Waiting Area

*Please provide remarks below:*

## Specialised Activities

*(Check all areas that apply and provide details below)*

Obstacles: Yes

No

Driving outside Yes

'Driving Area': No

Cones: Yes

No



# Equines, Harness and Vehicle

Please fill in the Equine Assessment form (including Harness and Vehicle information) for every equine that may be used in RDA Activities, and return with this document

## Safety & Volunteers

Volunteers with First Aid certification:

Number of Green Card holders:

Number of RDA-qualified coaches:

Proper safety gear (hats, gloves, high-visibility clothing)? Yes  No

Volunteers for turnouts? Yes  No

## Participant Drivers

Suitable clothing & footwear? Yes  No

Hats meet RDA standards? Yes  No

Supervised when not driving? Yes  No

## Health and Safety

Accident & incident book available? Yes  No

First Aid box correctly stocked? Yes  No

Accident procedure knowledge? Yes  No

Fire drill knowledge? Yes  No

Correct use of equipment (a) Person in charge (b) Volunteers? Yes  No

