

# CERTIFICATE OF COMPETENCE

## For External Events/ Competitions



### TO BE COMPLETED BY THE GROUP COACH/COACHES

COACH NAME: .....

(If additional):

COACH NAME: .....

COACH NAME: .....

COACH NAME: .....

GROUP EVENT ORGANISER: .....

RDA GROUP INVOLVED: .....

EVENT VENUE: .....

DATE/S OF EVENT: \_\_\_ / \_\_\_ / 20\_\_\_ to \_\_\_ / \_\_\_ / 20\_\_\_ **INCLUSIVE**

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### TO BE COMPLETED BY THE GROUP (Trustees)

I confirm that I am confident in my Group Coach/es ability to coach within a new environment:

Name:

Group Role:

I think my Group Coach/es will need more support before coaching within a new environment:

Name:

Group Role:

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Please return via email to [groupsupport@rda.org.uk](mailto:groupsupport@rda.org.uk) or post to:  
RDA National Office: Lowlands Equestrian Centre, Old Warwick Road, Shrewley, Warwickshire CV35 7AX  
(please ensure that you retain a copy for your own RDA Group records)