

## Vaulting Coach Registration Form

## Please tick the appropriate level:

	Barrel Coach	Vaulting	Coach *for coaches with BEV exemptions
	Lunging Certificate	Advanced	d Vaulting Coach *for coaches with BEV exemptions
Coach Details			
Coacii Detaits			
Name and date of birth:		Email Address:	
Group Name:		Contac	et Number:
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		<b>5</b> .	1. 1:6:
Home Address:	me Address: External qualifications:		al qualifications:
_			
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Please tick on sight or receipt of certificates:			
Green Card Safeguarding			
Disability Awareness			
Equine Knowledge			
Pre-Coach Training Day:			
☐ Has attended Pre-Coach Training Day			
☐ Has not attended Pre-Coach Training Day			
Assessor Details			
Name:	Signa	ture:	Date:

We respect your privacy and are committed to protecting your personal information. Your contact details will only be shared with relevant RDA UK volunteers where necessary to support coaching activities. This ensures appropriate guidance, communication, and assistance.

Your information will not be shared outside of RDA UK without your consent, and we will handle all data in accordance with applicable privacy regulations. If you have any questions or wish to update your details, please contact us.

