

Riders Information Form

The information is strictly confidential and will be used by Sport Camps Bulgaria according to it's privacy policy (for details please check the respective section on www.sportcamps.bg)

GENERAL INFORMATION
NAME (as it appears on passport)
COUNTRY
CITY
ADDRESS
PASSPORT #
EXPIRATION (month/day/year)
HEALTH STATUS
HEALTH BACKGROUND (any diseases or health disorders in the past, operations, chronic deseases – please describe)
SPECIAL MEDICINE REQUIRED (pls. specify)
ALLERGIES
DIETARY RESTRICTIONS OR VEGETARIAN MEAL REQUEST
OTHER (pls. specify)
PHYSICAL DATA
HEIGHT (cm)
WEIGHT(kg)
BLOOD GROUP
CONTACT INFFORMATION
PHONE(mobile)
E-MAIL
EMERGENCY PHONE
EMERGENCY CONTACT
RIDING LEVEL (for detailed description of the levels please check the respective section on www.sportcamps.bg)
Level 1 – Beginner <input type="checkbox"/>
Level 2 – Intermediate <input type="checkbox"/>
Level 3 – Advenced <input type="checkbox"/>
ACCOMMODATION INFORMATION
ROOM TYPE
SGL ROOM

DOUBLE ROOM	
I will share accommodations with:	
SMOKER YES / NO	
Date	Signature