

BRITISH HORSERACING AUTHORITY

**APPLICATIONS FOR RIDERS PERMITS
GUIDANCE NOTES**

1. These Guidance Notes should be read before completing the Application Form to which they relate. They are designed to assist but should any matter be unclear, applicants are encouraged to contact the Licensing Team for further confidential guidance.
2. Applications are considered on their individual merits but within the framework of these Guidance Notes.

Categories of Amateur Rider's Permits

CATEGORY "A": Holders of these permits may ride only in Flat races and/or Steeple Chases and Hurdle races confined to Amateur Riders.

CATEGORY "B": Holders of these permits may ride in Flat races confined to Amateur Riders, all National Hunt Flat races and in Steeple Chases and Hurdle races except those confined to licensed Jockeys.

3. All permits are subject to such further restrictions as the Licensing Committee considers necessary.
4. Applicants are required to demonstrate or confirm that:
 - 4.1. They have the competence and capability to ride in the races for which their application relates (see above).
 - 4.2. They are medically fit to race ride in accordance with the published Medical Standards for Fitness to Ride;
 - 4.3. They are otherwise in all the circumstances suitable to hold a Permit (i.e. that they are 'fit and proper'); and
 - 4.4. They have never held a professional riders' licence from any recognised turf authority and been paid for riding in a race unless meeting the requirements of Rule (D)19.
5. The detailed guidance contained in the remainder of this document sets out what is required and what each applicant will need to show.

A. COMPETENCE AND CAPABILITY

6. Each applicant will have to satisfy the Authority that he/she is a competent rider and capable of race riding within the Rules set out by the Authority.
7. Each applicant will also have to satisfy him/herself and confirm to the Authority, that:
 - 7.1. Save in exceptional circumstances they possess at least a conversant level in the English language, sufficient to receive and follow instructions; and
 - 7.2. They have familiarised themselves with the Rules of Racing in so far as they relate to Amateur Riders.
8. In determining a person's competence and capability for a **Category A Permit**, all first time applicants will be required to satisfactorily complete a one day training Seminar and a one day Assessment held at either the British Racing School or Northern Racing College. The one day training seminar programme includes:
 - 8.1. Body Position/equicisor demonstration;
 - 8.2. Principles of Schooling and Jumping;
 - 8.3. Equicisor tuition and practice;
 - 8.4. Principles of good race riding including the use of the whip and the rules relating to the bypassing of fences; and
 - 8.5. Interference and Stewards Enquiries including categories of interference and the conduct of an Enquiry.
9. Applications for exemption from the Assessment day may be made in writing to the Licensing Team where the applicant has achieved a minimum of 15 completed rides in Point to Point Steeple Chases or have been previously issued with a riders permit by another Recognised Turf Authority.
10. In determining a person's competence and capability for a **Category B Permit**, all first time applicants will be required to complete a five day Category B Training Course at either the British Racing School or Northern Racing College; and
 - 10.1. have had at least 15 completed rides under the Rules of Racing in Great Britain, the majority of which must be over obstacles (winners of Point to Point Steeple Chases may count towards this total); or
 - 10.2. have had at least 20 placed rides (winners, seconds and thirds only) in Point to Point Steeple Chases and/or completed under the Rules of Racing over obstacles.
11. Please note that the granting of a Category 'B' Permit is not automatic and will be dependent on the Authority being satisfied that the applicant has gained sufficient

experience and meet the standards to ride against professionals in addition to satisfactorily completing the training requirements.

12. All first time applicants are also required to submit at least two letters of support from either Licensed or Permitted Trainers, Professional Jockeys or other appropriate individuals as determined by the Authority.
13. In relation to persons who have not been either licensed or permitted by the Authority in the preceding two years, the Authority will require full particulars of that person's experience and employment in the intervening period.
14. In relation to persons who have previously been licensed outside Great Britain, a Certificate of Clearance and licensing record from the relevant Turf Authority (under whose Rules they were last licensed) should also be provided.

B. IDENTITY DOCUMENTS

Each applicant is required to submit a certified copy of their Passport or Birth Certificate, signed by a professionally qualified person (e.g. lawyer, teacher, local councillor or police officer) or a person of similar status, who must have known the applicant personally for at least two years.

The individual signing the photocopied document must also complete a 'Declaration to Support Identity of Applicant' form.

C. MEDICAL STANDARDS OF FITNESS TO RIDE

15. Each applicant is required to complete a declaration of health giving an accurate account of their current medical state (including any accidents or medication taken in the preceding twelve months) and estimated riding weight.
16. First time applicants and those renewing on every 5th anniversary of their first permit, must submit a comprehensive medical report completed by the applicant's own Doctor (General Practitioner or otherwise) who has access to the applicant's full medical records. Any applicant for a permit aged 55 years or over, must be examined annually as to his fitness to race-ride by the Authority's Chief Medical Adviser, in addition to submitting the medical report completed by their own Doctor.
17. Each applicant must complete a Baseline Concussion test at one of our designated concussion test centres.
18. The Authority reserves the right to request any applicant meet with the Chief Medical Adviser before their application is considered further.
19. Each successful applicant must hold a Medical Record Book issued by the Authority. Forms for both Medical Records Books and Medical Reports are available from the Licensing Team.

20. More details, including the full medical standards and contact details for the Chief Medical Adviser, can be found on the Authority's website: www.britishhorseracing.com.
21. An insurance policy has been negotiated on behalf of the Amateur Jockeys Association of Great Britain Ltd to provide accident cover and Public Liability Insurance for all permit holders between weigh-out and weigh-in.
22. All riders are strongly advised to make suitable provision for medical treatment when riding abroad and to establish that they have adequate personal insurance cover to provide for the cost of such treatment.

D. RIDING EXPENSES

23. Riders cannot be paid directly or indirectly for riding in a race, with the exception of expenses as set out in Rule (D)19 of the Rules of Racing and any trophy advertised in the conditions of the race to be given to the rider. Please see Rule (D)19 and (A)34.

When the holder of a Category B Permit has had more than 75 rides against professional jockeys, a riding fee and contribution to the Professional Riders Insurance Scheme (PRIS) are payable by the Owner(s) to the British Horse Racing Authority & Trustees of PRIS. The fee is not payable if you are the sole Owner of the horse or if it is owned solely by your spouse or parents or a partnership between such persons.

E. GENERAL SUITABILITY ('FIT AND PROPER')

24. In considering any application, the Authority must be also satisfied, taking into account any fact or matter that it considers appropriate, that the applicant is suitable to hold a licence.
25. The Authority expects full and frank disclosure from the applicant, who is required to disclose all matters known to him/her. Failure to do so will be a relevant factor in the assessment as to an applicant's honesty and integrity.
26. A person whose conduct or character is not in accordance with that which, in the opinion of the Authority, should be expected of a permitted person, may not be considered suitable and therefore may be refused a Permit.
27. In some cases a single factor may lead to the conclusion that someone is not suitable, whereas in another case the determination of whether someone is not suitable may depend upon the cumulative assessment of a number of matters.
28. It is not possible to produce a definitive list of all matters that would be relevant to a particular application. This document should be considered a guide as to the sorts of considerations that the Authority will have in mind when making such an assessment.
29. The criteria to which the Authority will have regard in assessing honesty and integrity include the following:

- a. Whether the applicant has been convicted of any criminal offence in Great Britain, or a foreign jurisdiction, excluding road traffic offences and offences which are spent under the Rehabilitation of Offenders Act 1974 and in the case of foreign offences, such as may be appropriate. Particular consideration will be given to offences of dishonesty, fraud and those relating to sexual conduct, violence, and animal welfare.
- b. Whether the applicant is the subject of any proceedings of a criminal nature or has been charged in connection with any alleged criminal offence involving dishonesty, fraud or those relating to sexual conduct, violence, or animal welfare.
- c. Whether the applicant has been the subject of any adverse finding by a judge in any civil proceedings, or has settled civil proceedings brought against him/her relating to his/her honesty or integrity.
- d. The applicant's record of compliance with the regulatory requirements of the Authority or its predecessors, of any other Turf Authority or of a regulator of any other sport in which he/she has participated or has been otherwise involved.
- e. Whether the applicant has been candid, open and truthful in all his/her dealings:
 - i. with the Authority in relation to the present or relevant past licence applications; and
 - ii. with any other Turf Authority or other sports regulator.
- f. Whether or not the applicant has been dismissed from any previous employment or position of trust or has been asked to resign or resigned on grounds connected with his/her honesty or integrity.
- g. Whether an applicant has been convicted of, or dismissed or suspended from employment for drug or alcohol abuses or other abusive acts or has other lifestyle or social issues, which are likely either to:
 - i. Impair significantly his/her ability to safeguard the welfare of any horse or meet the regulatory requirements of the Authority; or
 - ii. Render the applicant a threat to the health, welfare or safety of others involved in horseracing, or to the integrity of the sport.
- h. Whether the applicant has engaged in conduct or there are circumstances which may render the applicant susceptible to pressure from persons seeking to corrupt horseracing and whether the applicant is likely to or may engage in such conduct.

- i. An applicant's fitness and propriety includes assessment of the fitness and propriety of those with whom he/she is or may be associated or connected with in their personal or business dealings. For example, if the applicant is known to remain associated with person(s) who are considered by the Authority to pose an unacceptable risk to the integrity of horseracing notwithstanding specific warnings issued by the Authority about such association, that matter will be taken into account and its ultimate relevance to his/her suitability will be assessed in the light of the applicant's attitude to the association.
- j. The Authority has a policy of not granting an Amateur Riders Permit to a person actively engaged as, or otherwise associated with, a Bookmaker, having made the judgement that such a close financial interest, potentially in conflict with his interest as a rider, is likely to diminish public confidence in the integrity of racing. This policy does not apply to any such association pursuant to Jockey's Sponsorship deals under the Jockey's Sponsorship Code of Conduct

PROCEDURAL GUIDELINES

1. The following shall be subject to and not in substitution for any specific requirements set out in the Rules of Racing. These Guidelines apply where it is considered appropriate to convene a hearing before the Licensing Committee to determine a person's suitability to hold or to continue to hold a Licence, Permit or Registration pursuant to the Rules of Racing.
2. An applicant for the grant or renewal of a Licence or Registration is required to satisfy the Licensing Committee that he/she meets all the criteria contained within the Guidance Notes which accompany each application form. An applicant or holder of a Licence, Permit or Registration may be required to attend a hearing before the Licensing Committee, at which he/she may be legally represented. In such cases, the applicant shall provide such information and documents to the Licensing Committee as will enable it effectively to determine the issues relevant to the application.
3. The Licensing Committee shall consist of a minimum of three persons and, where appropriate, one shall be a legally qualified person of a suitable standing. One member of the Committee shall act as Chairman.
4. Where information comes to the attention of the Authority, which leads it to consider either that an applicant may not be a suitable person to hold a licence (or 'fit and proper') or that there may be another good reason for the Licensing Committee to refuse an application, or to withdraw or suspend a Licence, Permit or Registration, that person will be notified in writing not less than 6 weeks prior to licence issue date. Such a letter will include:
 - a. The facts as they appear to the Authority in such a way as to enable the applicant or other person to deal with its concerns
 - b. The reasons why it appears to the Authority that there may be grounds for it to recommend to the Licensing Committee that it refuse withdraw or suspend a Licence, Permit or Registration.
 - c. An invitation to attend a hearing, the proposed date and time of the hearing and the consequences of non-attendance. The Authority will seek to agree a hearing date convenient to the applicant and his advisors whenever reasonably practicable.
5. Within 21 days of receipt, the applicant will be expected to confirm in writing to the Licensing Team:
 - a. whether he/she will attend the hearing (i.e. wishes to proceed with their application);
 - b. whether he/she will be legally represented, and by whom; and

- c. the substance of, if not the completed submissions, what information/evidence he/she wishes to provide in support of the application and in contrast to information already before the Committee.
- 6. The Licensing Committee (acting as a Committee or by the Chairman alone) may give such other directions as may be necessary to ensure a fair and expeditious disposal of the Application, whether with or without a directions hearing.
- 7. If an applicant fails to attend a hearing or if his representative, or one or more of his witnesses, or other persons invited to attend the hearing, do not attend that hearing, the Licensing Committee may:
 - a. adjourn the hearing to a specified date or a date to be fixed; or
 - b. proceed with the hearing in the absence of the applicant or other person to whom the hearing relates or in the absence of a witness or other person.
- 8. The Licensing Committee shall require such persons to attend the hearing as it considers necessary to provide information or relevant opinion and to produce such documents as may be appropriate in support of the matters which are of concern to the Licensing Committee. If requested by the applicant, the Licensing Committee shall also require persons bound by the Rules of Racing or employed by the Authority to attend.
- 9. Information and documents considered by the Licensing Committee shall be used solely for the proper regulation of horseracing and shall not be disseminated further except where disclosure is required by law or following a proper application by a fellow competent regulatory body. The 'proper regulation of horseracing' shall include but not be limited to the following purposes:-
 - a. the interviewing of other persons who may assist the Licensing Committee to determine the matters before it;
 - b. reference to such information and documents in any written Reasons of the Committee for its decision;
 - c. those purposes specified in paragraph 16 below.
- 10. At the hearing, the Chairman will describe the nature of any matters which are of concern to the Licensing Committee with such particularity (including relevant evidence) as will enable the applicant to deal with those concerns.
- 11. In conducting the hearing the Licensing Committee will give the applicant or other person to whom the hearing relates an appropriate opportunity to:
 - a. make representations and call witnesses on any matter relevant to the hearing and provide further information with respect to any matter on which the Licensing Committee has sought clarification;

- b. cross examine all persons who have made statements and/or provided other information or documentation considered by the Licensing Committee;
 - c. question any other person appearing before the Licensing Committee on an issue relevant to the matters before it; and
 - d. address the Licensing Committee on any matter that it may be minded to take into account in disposing of the question(s) before it.
12. The hearing will take the form of a discussion led by the Licensing Committee which will not normally permit cross-examination, unless it considers that such is required to enable the fair disposal of the matters before it.
13. All questions concerning the admissibility of evidence shall be for determination by the Licensing Committee .
14. Where any fact or matter has to be established to the satisfaction of the Licensing Committee, the standard of proof shall be the standard applied in the civil courts in England in a dispute between private persons concerning a matter of comparable seriousness to the subject matter in question, i.e. satisfaction on the balance of probabilities on a sliding scale, with the more serious the matter the greater the degree of satisfaction required.
15. The Licensing Committee shall reach decisions by a simple majority. Decisions so reached shall be announced as decisions of the Licensing Committee. Reasons given for decisions shall not include references to any minority opinion or dissenting view.
16. The proceedings shall be held in private (unless the Committee considers otherwise) and shall be confidential, save that the Authority may publish on its website or in any press release the Decision, any Reasons, any summary thereof and any brief details of the proceedings or matters before the Committee, and save also as appears in paragraph 17 below. This provision is not intended to prevent and does not prevent the use of any material in an appeal to the Appeal Board or in any subsequent judicial proceedings.
17. The Licensing Committee may arrange for any hearing to be recorded and the recording shall be the sole property of the Authority. The applicant shall have the right to a copy (subject to the payment of appropriate costs) but no other person shall have the right to compel the production of it or a transcript save as authorised by the Licensing Committee or as required by law and subject to meeting any costs or expenses in providing it.
18. The decision of the Licensing Committee shall be final subject to relevant rights of appeal. The Licensing Committee will give written Reasons upon request from an applicant or other person to whom the hearing relates where the Licensing Committee consider it expedient in the interest of racing.

19. An appeal lies to the Appeal Board in those circumstances specified in paragraphs Part 2 of Schedule (A) 7.
20. The Licensing Committee shall be at liberty to disapply, amend or add to these Guidelines in any particular case, and to give directions as they consider appropriate for the purpose of disposing of the issues before it fairly and expeditiously and taking all other proper considerations into account (including the urgency of a situation).



Dear Applicant,

BRITISH HORSERACING AUTHORITY ASSESSMENT OF CONCUSSION

There are essentially three stages to this programme and these are as follows:

1) **Baseline Tests**

All jockeys need to have a baseline test carried out to establish their normal ability to carry out a series of simple tests. These tests are very straightforward but have to be administered in a standard way by qualified staff. We have established a network of regional testing centres (see attached list) and you should anticipate being at the centre for at least one hour to complete all the tests required. Once this baseline test is completed you will be able to join the new system.

2) **On the Racecourse**

Every time you suffer a head injury on a racecourse the RMO will carry out a standard series of tests to establish whether or not you have suffered a concussion. Initially you will be asked eight straightforward questions (usually by the racecourse nurse) and on the basis of your answers further examination may be required by the RMO. If this examination reveals that you have a concussion you will automatically be suspended for six clear days, eg. if you are suspended on a Wednesday you cannot ride again until the following Wednesday at the earliest.

3) **Return to Race Riding**

When you are completely symptom free (after a minimum of six clear days) you will need to report to one of the regional centres for re-testing and a medical examination by a specialist (Neurologist or Sports Physician). You will be reviewed by the British Horseracing Authority Medical Department and a decision will be made on your return to race riding (completing the procedure does **not** guarantee that you will be cleared to race ride immediately).

From the 1st January 2005 Amateur Riders are required to have a baseline concussion test at the following times:

- i) When they first apply for a Permit;
- ii) Whenever they have a 4-Page Medical;
- iii) Whenever they re-apply for a Permit in the year following any concussion;
- iv) Annually if they have more than 25 rides per annum.

After any concussion, all Amateur Riders will have to follow the Concussion Protocol before they ride again.

If you have any queries do not hesitate to contact me.

Yours sincerely,

Dr. Michael Turner,
Chief Medical Adviser.

Tel: 020 7152 0138 (Direct Dial)
Fax: 020 7152 0136 (Direct Dial)
Email: mturner@britishhorseracing.com

British Horseracing Authority Limited, 75 High Holborn, London WC1V 6LS Tel: 020 7152 0000 Fax: 020 7152 0001

Web: britishhorseracing.com Email: info@britishhorseracing.com

Registered Number: 2813358 England. Calls may be recorded

CENTRE	NURSE	CLINIC TIMES	TELEPHONE
EDINBURGH Spire Murrayfield Hospital 122 Corstophine Road Edinburgh EH12 6UD	Janice Baillie Jane Street	Friday 2pm-6pm	Tel: 0131 3162596 Fax: 0131 3347338 Janice.BAILLIE@spirehealthcare.com streetja@spirehealthcare.com
NEWCASTLE Neuropsychology Department (Outpatients) Newcastle General Hospital Westgate Road Newcastle upon Tyne NE4 6BE	Ellen Duff Tom Kelly	Variable	Tel: 0191 256 3832 Ellen.duff@nuth.nhs.uk
YORK The Nuffield Hospital Haxby Road York YO31 8TA	Erika Spratt	Friday pm (Variable)	Tel: 01904 715000 ext 2145 Fax: 01904 715288 Erika.Spratt@nuffieldhospitals.org.uk
MIDLANDS The Warwickshire Nuffield Hospital The Chase Old Milterton Lane Leamington Spa, Warwickshire CV32 6RW	Patricia Bryniaska Jacqueline Crabtree	Variable	Tel: 01926 427971 Jacqueline.Crabtree@Nuffieldhospitals.org.uk *warwickoutpatients@nuffieldhospitals.org.uk
CAMBRIDGE Orchard House Surgery Fred Archer Way Newmarket Suffolk CB8 8NU	Sonia Francis Helen Wilson	Variable	Tel: 07518 071370
LONDON (1) 30 Devonshire Street London W1G 6PU	Julia White Valerie Whatley	Wednesday 9.30am	Tel: 0207 908 3602or3 Fax: 0207 908 3624 Julie.White@HCAHealthcare.co.uk
LONDON (2) 75 High Holborn London WC1V 6LS	Pippa Theo	Variable	Tel: 0207 152 0138 ptheo@britishhorseracing.com
SWINDON The Ridgeway Hospital Moormead Road Wroughton, Swindon, Wiltshire SN4 9DD	Tina West Trish Pearce	Friday 1pm-8pm	Tel: 01793 816018 Fax: 08001694149 Outpatients_Ridgeway@bmihealthcare.co.uk

Updated: August 2009



DECLARATION OF HEALTH – AMATEUR RIDER
ALL QUESTIONS MUST BE ANSWERED IN FULL

Surname All Forenames

Any Previous Surnames, e.g. maiden name

Age Date of Birth 19 Normal Riding Weightstlbs Height

Daytime telephone number

Name of General Practitioner

Address of General Practitioner

In case of emergency we may need to contact your next of kin, please complete the following:

Name of next of kin
.....

Relationship to you (spouse/partner/parent/etc)

Contact Telephone Numbers
.....

Did you hold a Point-to-Point Riders Qualification Certificate (RQC) for 2010? YES ☐ NO ☐

Do you intend to apply for a Point-to-Point (RQC) for 2010/11? YES ☐ NO ☐

Date of last medical examination by your own GP or the Jockey Club/Horseracing Regulatory Authority/British Horseracing Authority Medical Adviser in support of an application for a Permit or RQC.....

Date of last Baseline Concussion Test

Which Centre did you attend?

NB: Please read attached notes to see if you will be required to have a further Baseline Test before your Permit can be granted.

THIS SECTION TO BE COMPLETED BY FIRST TIME APPLICANTS ONLY

Please list **ALL** operations, hospital admissions, head injuries/concussions, fractures and dislocations that you have **EVER** suffered together with dates (including any unconnected with racing):

Details	Date
.....
.....
.....
.....
.....

Please list all injuries and serious illnesses (requiring medical attention) that you have suffered in the last 12 months (including any unconnected with racing):

Injury/Illness	Date
.....
.....
.....

Do you currently hold a valid Driver's Licence?

YES ☐ NO ☐

Have you ever had your Driving Licence revoked or suspended for medical reasons?

YES ☐ NO ☐

Please list **ALL** medications you are currently taking or have taken for more than 14 consecutive days in the last 12 months (excluding the contraceptive pill):

Have you ever been refused a licence or permit to ride on medical grounds by the British Horseracing Authority, the Horseracing Regulatory Authority, the Jockey Club or any other Turf Authority?

YES ☐ NO ☐

Do you have private health insurance (e.g. BUPA, PPP)?

YES ☐ NO ☐

DATA PROTECTION

It is agreed that any information provided by me may be held by the British Horseracing Authority, the Jockey Club, or Weatherbys Group Limited in their computer records, and that it may be properly disclosed to other agencies registered to receive such information in connection with the management, regulation and integrity of horseracing in accordance with the provisions of the Data Protection Act 1998.

MEDICAL CONSENT

I hereby consent that the medical information held by the British Horseracing Authority relating to my fitness to race ride may be made available to medically qualified personnel on racecourses on racedays (BHA registered Racecourse Medical Officers and BHA registered nurses). I understand that such sharing of information will only take place when it is essential to ensuring that informed medical care and advice is available to jockeys on racedays. I also understand that the confidentiality of this information will be maintained at all times and shall only be processed in accordance with the provisions of the Data Protection Act 1998.

DECLARATION

I accept that if there is a change to my health within the next 12 months this will be notified immediately to the British Horseracing Authority's Medical Department. I accept that this may result in a temporary suspension of my Permit and that failure to notify the British Horseracing Authority's Medical Department may result in disciplinary action.

I acknowledge that when riding under the Rules of Racing there is a very high risk of injury to me in comparison to other sporting activities and that such risk can come from other riders and horses. I accept that by taking part in horseracing under the Rules of Racing my physical safety could be endangered and that neither the British Horseracing Authority nor the organisers have a responsibility to assess the skill and experience of the riders and horses taking part.

I declare that the information provided on this form is complete and true to the best of my knowledge.

Signed (Applicant)

Dated

Your application for a Permit cannot be considered unless all relevant medical details are given on this form. Statements such as 'see Medical Record Book' or 'refer to previous application' are not sufficient.

If you are under 18 years of age, this declaration should be signed below by your Parent or Guardian:

I agree that the above named rider may undergo testing for prohibited substances (doping control) at any time as required under the British Horseracing Authority Rules of Racing.

Signed (Parent/Guardian of Applicant)

Relationship to Applicant

Dated

OFFICE USE ONLY	
Approved	
Date	
Comments	
Concussion/Head Injury Register	
Point-to-Point Register	
4 Pager	

FOR OFFICE USE	
FEE	
D.H to CMA	
D.H to CLEAR	
PREV	
CURRENT	
N.O.R	
PRO. RIDES	
M.E SENT	
M.E to CMA	
M.E CLEAR	
G.	
CAT/REST	
NO.	

FOR OFFICE USE	
DISQ.	
ID	
CONC TEST	
SER. NO	
TYPE	
DATES	
TRNR	
SEASONS	
CAREER	
CLAIM	
KEY	
NPAD	



APPLICATION FORM FOR AN AMATEUR RIDER'S PERMIT

(Period from July 1st 2010 until June 30th 2011)

UNDER RULE (D)16 OF THE RULES OF RACING –
RIDER MANUAL (D)

FEE: £178.04

DETAILS OF APPLICANT – PLEASE ANSWER ALL QUESTIONS BELOW

1. Category of Permit applied for (please tick 1 box)	Category 'A' <input type="checkbox"/> Flat & Jumping <input type="checkbox"/> Flat Only <input type="checkbox"/> Jumping Only Category 'B' <input type="checkbox"/>
2. Surname	
3. All Forenames	
4. Title (Mr, Mrs, Miss etc)	
5. All previous surnames e.g. Maiden Name (if applicable)	
6. Age and Date of Birth	Age: Date of Birth:
7. Nationality	
8. Permanent address	Postcode:
9. Home telephone number	
10. Mobile telephone number	
11. Profession, business or occupation	
12. Name and address of business/employer	
13. If you have no paid occupation, please say by whom you are supported, or how you maintain yourself in your activities as an amateur rider	
14. Next of kin details (emergency use)	Name of next of kin: Relationship to you: Contact telephone number:
15. Normal riding weight	<input type="text"/> Stones <input type="text"/> Pounds
16. Have you previously held any form of licence or permit under the Rules governing horseracing in Great Britain other than a Point-to-Point Qualification Certificate?	<input type="checkbox"/> Yes <input type="checkbox"/> No
17. If the answer to question 16 is Yes, please state type of licence or permit	
18. Date of expiry of last permit (if applicable)	
19. Have you held a licence or permit outside Great Britain?	<input type="checkbox"/> Yes <input type="checkbox"/> No
20. If the answer to question 19 is Yes, please state type of licence or permit and under which governing body it was held	Type of licence/permit: Governing body:
21. Date of expiry of your last permit outside GB (if applicable)	

SUMMARY OF RIDES UNDER LAST PERMIT – IF APPLICABLE (PLEASE EXCLUDE POINT TO POINT STEEPLE CHASES)

22. Number of rides under your last permit (if applicable) in:- (Approximate figures are acceptable)	Amateur Riders Flat races	<input type="text"/>
	Hunter Steeple Chases	<input type="text"/>
	Other Amateur Riders Steeple Chases and/or Hurdle races	<input type="text"/>
	National Hunt Flat Races	<input type="text"/>
	Steeple Chases and/or Hurdle races open to Professional Jockeys	<input type="text"/>

SUSPENSIONS OR DISQUALIFICATIONS

23. Have you ever been refused a licence or permit by any Turf Authority. If yes, please state particulars in a separate letter.	<input type="checkbox"/> Yes <input type="checkbox"/> No
24. Have you ever had any suspension of a riding licence or permit imposed upon you by any Turf Authority or any other disqualifications or fines imposed upon you in connection with horseracing (including Point- to-Point meetings) within the past three years? If yes, please give details	

EMPLOYMENT IN RACING STABLES

25. If you are currently employed by any racehorse trainer or attached to any racing stables (or have been within the past 2 years) please state the name of the trainer(s) and provide a brief description of the nature of the employment/attachment e.g. work riding, schooling, on a full or part time basis.	

GENERAL

26. Have you ever been declared bankrupt, been subject of an Individual Voluntary Arrangement or other statutory based composition with creditors alone or with others or had a criminal conviction (other than a minor motoring offence) recorded against you? If YES, give full details (an affirmative answer to this question is not a bar to obtaining a permit)	<input type="checkbox"/> Yes <input type="checkbox"/> No
27. Are you actively engaged as a Bookmaker or do you have any financial interest in any betting businesses including spread betting businesses, e.g. as a shareholder or director? If YES, please provide full details in a separate letter for consideration by the Licensing Committee to include the size of your shareholding (of applicable) and the degree of your involvement with the management of the business	<input type="checkbox"/> Yes <input type="checkbox"/> No

TRAINING SEMINAR AND ASSESSEMENT Please answer if you have never held a Category 'A' Permit

28. I attended/will be attending* the British Horseracing Authority approved training seminar for Amateur Riders wishing to ride under Rules held At:.....on..... I attended/will be attending* the Assessment day At:.....on..... I am applying for exemption from the Assessment day and enclose details <input type="checkbox"/> (please tick if applicable) *delete as appropriate

PLEASE COMPLETE THIS PAGE IN FULL ONLY IF YOU ARE MAKING AN APPLICATION FOR THE FIRST TIME FOR A CATEGORY 'A' PERMIT.

DETAILS OF YOUR POINT-TO-POINT RIDES

	Date	Meeting	Race	Horse	Result
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					

WORK RIDING AND SCHOOLING EXPERIENCE

(please include the name(s) of any Trainer(s) you have ridden work and schooled for and the relevant dates)

OTHER EXPERIENCE

(Please give details of any other experience that might assist the Licensing Committee when considering your application)

Do you or have you held an account with the British Horseracing Authority or Weatherbys?

No ☐

Yes ☐

Please give Account Reference (if known)

PLEASE ENSURE THE FOLLOWING DOCUMENTS ACCOMPANY NEW APPLICATIONS:-

Check list (please tick)

- (a) Your Medical Report Form ☐
- (b) Medical Record Book signed by your GP on page 6 ☐
(unless you have previously ridden in Point-to Points and your MRB has been signed)
- (c) Declaration of Health Form ☐
- (d) A letter from the trainer of the horse containing the particulars of your first ride (see covering letter) ☐
- (e) Two letters in support of your application from either licensed or permitted trainers ☐
speaking as to your experience and competence as a rider (see covering letter)
- (f) A cheque for the relevant fee (we are unable to debit this fee to any account) ☐
- (g) Documents to support your identity ☐

AND FOR APPLICANTS WISHING TO RIDE IN FLAT RACES (if applicable)

- (h) A letter from a trainer, licensed for flat races, confirming your experience and competence in taking horses through starting stalls ☐

THIS SECTION TO BE COMPLETED BY ALL APPLICANTS

Please state the total number of winners you have ridden under the Rules of any recognised Turf Authority (this total should exclude Point-to-Point Steeple Chases)

PLEASE STATE THE TOTAL NUMBER OF WINNERS IN THE FOLLOWING RACES:- (If nil please write 'NIL' in the relevant boxes)

	Great Britain (England, Scotland & Wales)	Overseas (including Ireland and Channel Islands)
Flat races (Amateur Riders and/or open to Full Jockeys)		
Steeple Chases, Hunters Steeple Chases and Hurdle races (Confined to Amateur Riders and/or open to Full Jockeys)		
Conditional Jockey's Steeple Chases and Hurdle races		
National Hunt Flat races		
Full details of the first ride for which your permit is required (See covering letter) (Please be aware that applications can take up to 3 weeks to be processed)	Date: Race:	Meeting: Horse:

DECLARATION

I the undersigned hereby request that this application, for an Amateur Rider's Permit, will be considered by the Licensing Committee of the British Horseracing Authority (BHA), in accordance with its published criteria. I confirm that I have read, understood and I am in compliance with the published Guidance Notes that accompany this application form. Furthermore, should a permit be granted I agree to be bound in all respects by the BHA Rules of Racing in force from time to time and the Rules of the applicable recognised Turf Authority concerned when riding abroad. I certify that I have read and understood Rule (D)19 of the Rules of Racing, set out in the accompanying letter, and that I am not thereby debarred from holding an Amateur Rider's Permit.

The particulars as completed in this Application Form are accurate and true. I confirm that I have disclosed any and all information known to me which might reasonably be said to be relevant to the consideration of this application and I accept that in the event the Licensing Committee considers that I have knowingly omitted material information, it may reject my application on this ground alone. During the currency of this permit, I undertake to notify the BHA immediately of any matter or change of circumstances which, on the basis of the Guidance Notes, could reasonably be said to be relevant (to my position as an Amateur Permit holder). Furthermore I consent and authorise the BHA (or its agents) to make enquiries of, and ascertain from, all appropriate authorities to establish anything which could be relevant to the decision to grant this permit. Such authorities shall include, but are not limited to, Credit Reference Agencies, Criminal Record Bureau and/or any police authorities to establish anything which could be relevant to the decision to grant this permit. Such authorities shall include, but are not limited to, Credit Reference Agencies, Criminal Record Bureau and/or any police authorities to provide such information about me to the BHA.

I acknowledge that when riding under the Rules of Racing, there is a very high risk of injury to me in comparison to other sporting activities and that such risk can come from other riders and horses. I accept that by taking part in horseracing under the Rules of Racing my physical safety could be endangered and that neither the BHA nor the organisers have a responsibility to assess the skill and experience of the riders and horses taking part.

I undertake to notify the BHA within 7 days if I propose to enter into any betting business including spread betting business after my permit is granted.

I undertake to notify the BHA within 7 days if I am convicted of any criminal offence (other than a motoring offence) or I become bankrupt or a proposal for an Individual Voluntary Arrangement is made after this permit is granted.

I undertake to notify the BHA within 7 days of any change to my home address, mobile or home phone number.

I acknowledge and accept that it is the policy of the BHA to publish its licensing decisions and this includes, if applicable, the giving of Reasons for refusal, the imposition of Conditions on a permit or the withdrawal of a permit. I agree that the Licensing Committee may refer to or publish any information concerning my application which it has considered in reaching its decision.

DATA PROTECTION

Any information (including personal data and sensitive personal data) provided by the applicant will be held by the BHA (or Weatherbys Group Ltd) and such information may be properly disclosed to other agencies in connection with the management, regulation and integrity of horseracing or otherwise used or disclosed by the BHA in connection with the management, regulation and integrity of horseracing or otherwise used or disclosed by the BHA in connection with the regulation of horseracing generally.

The BHA has the opportunity to use its address list as a source of revenue for the racing industry by undertaking mailings on behalf of selected companies; individual addresses are not divulged. Please tick here if you do not wish to receive such mailings. ☐

Signature of Applicant.....Date.....

A person who is not a part to this application has no right under the Contracts (Rights to Third Parties) Act 1999 to enforce any term of agreement resulting from the application.

The Licensing Committee draws attention to the provision of Rule (D)54 and emphasises that an Amateur Rider must not bet or lay a horse to lose a race in which they are due to ride or instruct anybody else to do so on their behalf. It also draws attention to the provisions of Rule (D)36 that no jockey shall ride in a race unless he/she is wearing a skull cap and a body protector of an approved pattern.

PLEASE RETURN COMPLETED FORM TO THE LICENSING TEAM, BRITISH HORSE RACING AUTHORITY, 75 HIGH HOLBORN, LONDON, WC1V 6LS



DECLARATION OF HEALTH – AMATEUR RIDER
ALL QUESTIONS MUST BE ANSWERED IN FULL

Surname All Forenames

Any Previous Surnames, e.g. maiden name

Age Date of Birth 19 Normal Riding Weightstlbs Height

Daytime telephone number

Name of General Practitioner

Address of General Practitioner

In case of emergency we may need to contact your next of kin, please complete the following:

Name of next of kin

Relationship to you (spouse/partner/parent/etc)

Contact Telephone Numbers

Did you hold a Point-to-Point Riders Qualification Certificate (RQC) for 2010? YES ☐ NO ☐

Do you intend to apply for a Point-to-Point (RQC) for 2010/11? YES ☐ NO ☐

Date of last medical examination by your own GP or the Jockey Club/Horseracing Regulatory Authority/British Horseracing Authority Medical Adviser in support of an application for a Permit or RQC.....

Date of last Baseline Concussion Test

Which Centre did you attend?

NB: Please read attached notes to see if you will be required to have a further Baseline Test before your Permit can be granted.

THIS SECTION TO BE COMPLETED BY FIRST TIME APPLICANTS ONLY

Please list **ALL** operations, hospital admissions, head injuries/concussions, fractures and dislocations that you have **EVER** suffered together with dates (including any unconnected with racing):

Details	Date
.....
.....
.....
.....
.....

Please list all injuries and serious illnesses (requiring medical attention) that you have suffered in the last 12 months (including any unconnected with racing):

Injury/Illness	Date
.....
.....
.....

Do you currently hold a valid Driver's Licence? YES ☐ NO ☐
Have you ever had your Driving Licence revoked or suspended for medical reasons? YES ☐ NO ☐

Please list **ALL** medications you are currently taking or have taken for more than 14 consecutive days in the last 12 months (excluding the contraceptive pill):

Have you ever been refused a licence or permit to ride on medical grounds by the British Horseracing Authority, the Horseracing Regulatory Authority, the Jockey Club or any other Turf Authority? YES ☐ NO ☐
Do you have private health insurance (e.g. BUPA, PPP)? YES ☐ NO ☐

DATA PROTECTION

It is agreed that any information provided by me may be held by the British Horseracing Authority, the Jockey Club, or Weatherbys Group Limited in their computer records, and that it may be properly disclosed to other agencies registered to receive such information in connection with the management, regulation and integrity of horseracing in accordance with the provisions of the Data Protection Act 1998.

MEDICAL CONSENT

I hereby consent that the medical information held by the British Horseracing Authority relating to my fitness to race ride may be made available to medically qualified personnel on racecourses on racedays (BHA registered Racecourse Medical Officers and BHA registered nurses). I understand that such sharing of information will only take place when it is essential to ensuring that informed medical care and advice is available to jockeys on racedays. I also understand that the confidentiality of this information will be maintained at all times and shall only be processed in accordance with the provisions of the Data Protection Act 1998.

DECLARATION

I accept that if there is a change to my health within the next 12 months this will be notified immediately to the British Horseracing Authority's Medical Department. I accept that this may result in a temporary suspension of my Permit and that failure to notify the British Horseracing Authority's Medical Department may result in disciplinary action.

I acknowledge that when riding under the Rules of Racing there is a very high risk of injury to me in comparison to other sporting activities and that such risk can come from other riders and horses. I accept that by taking part in horseracing under the Rules of Racing my physical safety could be endangered and that neither the British Horseracing Authority nor the organisers have a responsibility to assess the skill and experience of the riders and horses taking part.

I declare that the information provided on this form is complete and true to the best of my knowledge.

Signed (Applicant)

Dated

Your application for a Permit cannot be considered unless all relevant medical details are given on this form. Statements such as 'see Medical Record Book' or 'refer to previous application' are not sufficient.

If you are under 18 years of age, this declaration should be signed below by your Parent or Guardian:

I agree that the above named rider may undergo testing for prohibited substances (doping control) at any time as required under the British Horseracing Authority Rules of Racing.

Signed (Parent/Guardian of Applicant)

Relationship to Applicant

Dated

OFFICE USE ONLY	
Approved	
Date	
Comments	
Concussion/Head Injury Register	
Point-to-Point Register	
4 Pager	