  
Somerset Equus Ltd. Whitmoor, Isle Brewers Lane, Isle Brewers, Taunton. TA3 6QR

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Consent Form

Name.……………………D.o.B.…………………

Completed by……………Date…………

Relationship to client if applicable………………

I consent to (please insert name) ……………. being around and handling the horses with supervision.

I agree that Somerset Equus may provide refreshments and snacks and confirm that (please insert name) ………. has no food or nut allergies.

I agree to all confidential information being kept in a secure manner.

I agree that information can be shared with any relevant agencies or organisations.

I agree/disagree to Somerset Equus using photographs/videos on our social media or for promotional purposes.

For office use:

Referral received by:…………………………………

Date:……………………………….

