



# PHYSICAL EXEMPTION REQUEST FORM EC LEARN TO RIDE/DRIVE PROGRAMS

The EC Physical Exemption Request Form is available to all persons facing **permanent** physical disability, preventing them from being able to perform the tasks required in the riding phases of the National Learn to Ride/Drive programming. Individuals submitting an exemption request, if granted approval, will be required to complete the written and practical tests of all applicable Learn to Ride levels, passing each written test with 70% or higher.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Prov/Terr Member #: \_\_\_\_\_

Address: \_\_\_\_\_

Prov./Territory: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

In which Learn to Ride/Drive discipline do you wish to receive an exemption?

English (flat)  English (jumping)  Western  Driving  Saddle Seat

Please indicate why you are unable to participate in these activities as required:

Do you plan on pursuing instructor/coach certification?  Yes  No

Please list one Equestrian Professional reference:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Please make sure the following items are included with this application:**

Request Form  Background Information Sheet  Medical Documentation

### Agreement and Consent

By completing this application and providing information to the {Name of PTSO}, I acknowledge and consent to the PTSO sharing the information with appropriate channels as deemed necessary to confirm exemption.

Authorized Signature: \_\_\_\_\_

Name (print): \_\_\_\_\_ Date: \_\_\_\_\_



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**Describe your equestrian background in detail:**

**Please include any other additional information/documentation:**