



**ACCIDENTS IN THE ARENA REQUIRING FIRST AID TREATMENT**  
**(to be completed by Officials in Judges Box)**

**Venue:**.....

**Date:** ..... **Time** .....

**Class/No:**.....

**Name of Rider :** .....

**Name of Horse/Pony:** .....

**Nature of Accident:**

**Signed** .....

**Print Name** .....

**Membership No.** .....

(This information is supplementary to the BSJA Accident form which should be completed by the Show Secretary. Both forms should be forwarded to British Showjumping HQ as soon as possible).