



## EQUINEABILITY

### CONSENT TO COLLECT AND USE INFORMATION

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I consent to EquineAbility Therapeutic Riding Centre collecting my personal information in order to access its therapeutic riding lessons.

This information may include one or more of the following:

1. Date of birth/age-related information
2. Health-related data
3. Police Check

This information may be shared with program representatives in the development of a therapeutic riding program, as a volunteer, or to the national therapeutic riding body, CANTRA, only when it is required to gather statistical data.

I have received a copy of the EquineAbility Privacy Policy and I understand that I may withdraw my consent to the release of my information by contacting Angie Ruigrok at **905.382.5779**.

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Print Name

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Client/Volunteer Signature

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Date