

Warrior on Horseback Experience Application Form

Year • Month • Day

Application Date _____

Address			
Full Name			Male • Female
Date of Birth	Year • Month • Day		
Height (cm)	cm	Weight (kg)	kg
Preferred Time	① 10:00~ ④ 12:30~ ② 10:45~ ⑤ 13:15~ ③ 11:30~ ⑥ 14:00~ 1st Preferred Time _____ 2nd Preferred Time _____		
Contact Information (Phone/E-Mail)			
In the case of minors: Parental and Legal Guardian Consent Form	I give permission for the applicant to attend the Warrior on Horseback Experience event. Address: Full Name: _____ Hanko/Signature Contact Information : (Phone/E-Mail)		
Remarks			

【Important Points】

- ※ If the number of applications exceeds the number of spots, a random draw will be held to decide participants.
- ※ For minors, consent from a legal guardian is required.
- ※ Please pay the participation fee on the day of the event.
- ※ Please bring your T-Shirt, shorts, and *tabi* socks (split-toe socks) on the day of the event.
- ※ We will apply for Recreational Accident Insurance for you on your behalf.
- ※ In the case of rain, the horseback riding experience will be cancelled. Participants will still be able to wear the armor, helmets and battle surcoats.