



Checked and Approved by:

Date: _____

New Kingdom Trailriders Rider UPDATE Form 2025

Rider Check List	___
Chimp Mail	___
Rider Contact	___
Rider Emergency	___
Quickbooks	___
Equiforce	___
Scanned	___
Attached	___
Master Mailing List	___
Ready to be Filed	___
Staff use only	

IF SIGNATURES ARE TYPED:

I am checking this box and agree that my typed signature serves as my handwritten signature for all forms included in this packet.

Rider Name: _____

Rider Age: _____

Rider Gender: _____

Rider Height: _____ ' _____ "

Rider Weight: _____ lbs

Rider has IEP plan: Yes* No **(If yes please attach a copy of the most current IEP or BIP to this packet)*

Rider Diagnosis/What qualifies this student to be a rider at NKT:

Rider's Riding Goals for 2025 (What rider wants to learn/work on):

- 1.
- 2.
- 3.

I have read the 2025 NKT Riders Handbook. By signing below, I indicate that I understand and agree with NKT policies: ****Updates have been made to the 2025 Handbook be sure to read****

Additional Rider Information

The collection of this will help us provide additional information for grant funding and will assist with collection of overall statistical data for our organization.

Which county do you reside in?

What is your race or Ethnicity?

Asian _____

Black or African American _____

Hispanic or Latino _____

Middle Eastern or North African _____

Multiracial or Multiethnic _____

Native American or Alaska Native _____

Native Hawaiian or other Pacific Islander _____

White/Caucasian _____

Another race or ethnicity _____

Are you or a member of your family a veteran?

No _____ Yes _____ If, so who _____

Rider Apparel Sizes

*There may be a time that clothing items are given away at no cost to you.
Having this information allows us to not have to guess on sizing.*

**There will be times where your sizes are collected for specific events for easier accessibility.*

T-Shirt Size _____

Long Sleeve Size _____

Hoodie/Jacket Size _____

****If no additional information has changed since the completion of the 2024 forms, you may skip pages 3 & 4.

_____ Initial here that no additional information has changed & forms are complete

Date _____

NKT – RIDER REGISTRATION FORM UPDATE – 2025

Rider Name: _____

Rider Contact information:

Preferred method of contact: Phone Email

Primary Contact (Self/Parent/Guardian):

Name: _____

Relationship to Student or Self: _____

Phone number: _____

Email: _____

Address: _____

Secondary Contact (Self/Parent/Guardian):

Name: _____

Relationship to Student or Self: _____

Phone number: _____

Email: _____

Address: _____

*If there is an additional information you need to update it is your responsibility to email Monika at Monika@nktriders.org