

2010/2011 Winter Area Competitions Form

I would like to be considered for the following:

Name of Rider DoB (if under 18)

Name of Owner

Official Name of Horse (as on Flu Cert or Passport)

Address

Tel No Mobile No

Email address

Copy of Flu Cert or Passport enclosed (must show identification chart & description and all flu injections)

Have you attended any Riding Club Training?

(If yes, please provide details)

		Senior Competition (Area qualifier test/height)	Tick Here	Junior Competition (Area qualifier test/height)	Tick Here	BE/BD Points or BSJA Winings
Festival of the Horse Challenge						
Sunday 1 April at 2012 Rogate						
Challenge (SJ and XC)	Team/Ind/Pair	90cm Nov		90cm Nov		
	Team & Ind	1.00m Int		1.00m Int		

HELP! In order to enter teams for these events we have to have helpers - 2 per team - so if you are available and would like to help we would love to hear from you, please email me at nina_mc@hotmail.co.uk.

If you would like to take part please fill in the above form as soon as possible and send (post or email) to Nina Clarke with a copy of your horse's flu vaccinations (from the beginning), description and diagram of the horse and official name.

Contact Details:

Email: nina_mc@hotmail.co.uk

Phone: 07779 129016

Address: 50 Mill Way, Ashurst Bridge, Southampton, SO40 7JF