

ARNISS EQUESTRIAN SHOW ENTRY FORM      DATE OF SHOW \_\_\_\_\_

CLASS	RIDER NAME	HORSE NAME	ENTRY FEE

TOTAL ENTRY FEE \_\_\_\_\_ (entry will not be accepted without fee)

Name \_\_\_\_\_

Address \_\_\_\_\_

Tel Number \_\_\_\_\_ Mobile \_\_\_\_\_

e-mail address \_\_\_\_\_

please tick if you wish to be placed on our e-mailing list regarding news and events \_\_\_\_\_

Signed \_\_\_\_\_ (parent/guardian signature if competitor is under 16years of age). Signature assumes acceptance of Rule 1 on schedule.