

Signed: _

Date: _

Saturday 3rd December 2016

MOBILE:

	EQUESTRIAN C	LASSES	ENI	RYFU	JKM			WWW.V	vhangareis	show.co.i	
SECTION/S:											
Name of Animal Please PRINT clearly	Riders or Handler's Name Please PRINT clearly	Class Numbers to be Entered Please PRINT clearly						Horse/Pony Reg. No	Entry \$	Fee ¢	
			Total Entry Fees								
THIS IS A LEGAL DOCUMENT. The owner/parent/guardian signing or authorising the entry must be over 16 years of age. Entries WILL NOT BE ACCEPTED OR PROCESSED unless all monies are enclosed/paid, the entry form is properly completed, SIGNED and all required documents are attached.		Catalogue (OPTIONAL) Pre-order and Pay \$5 each now or \$7 each at the Show									
		A&P Ground Levy \$7 per horse							·		
		ESNZ Fee Horse/Pony Fully Registered for ESNZ SJ - \$5 per horse / pony									
		ESNZ Fee Horse/Pony NOT FULLY registered for SJ \$20 per horse /pony Temporary Pens are NOT allowed. Horse Pens \$5 per night or \$10 weekend									
Competitors supply their own breast plate/competitor number.		Entry Processing Fee \$5 (compulsory)									
Original Height Certificate & Performance Card must be carried by Rider on Show Day and be produced when requested.		One wristband pass is issued per rider/handler named above.									
Stallion Badges must be worn – Competitors to provide their own.		If you require additional passes, these can be purchased at \$10.00 per pass									
Show Jumping entrants must complete this entry form AND a copy of their ESNZ competition form (downloaded from ESNZ).		(This is inclusive of GST where applicable) TOTAL DUE \$									
The attention of competitors is particularly drawn to the conditions relating to the misuse of substances and the intention of the committee to undertake testing for forbidden substances.		Please tick (🗹) payment method: 🗆 Enclosed Cheque payable to Whangarei A&P Society OR 🕒 Internet Banking: BNZ 02 0492 0044666 00									
COMPETITOR DECLARATION: The submission of my entries, either written or be electronic means, and/or participation in the competition(s), denotes that I have read and accepted the RAS and Whangarei A&P Society Rules and Regulations and the Society's conditions of entry. This also indemnifies the Whangarei A&P Society under the provisions of the Health & Safety at Work Act 2016.		Please state full name, date paid & 'EQ Entries' as reference									
		Competitor N	AME								
		ADDRESS									
									Postcode:		

PHONE:

EMAIL:

OFFICE USE ONLY: