

Flaxbourne Agricultural & Pastoral Association

ANNUAL SHOW ENTRY FORM

NOTE: CLOSING DATE ON SCHEDULE

NO LATE ENTRIES ACCEPTED

**WRITE ON THIS COPY — Detach Bottom Copy for your record.
Financial Members Only entitled to reduction in Entry Fees.**

Section	Class	No. of Entries	Entry Fees \$ c		HORSE'S NAME or Description of Exhibit	Name of Exhibitor or Rider

HEIGHT PERFORMANCE CARD No.:

Off Site Overnight Horse Accommodation Required **On Site Horse Yard - \$10 per night \$** _____

Name & Address of Exhibitor
 Mr
 Mrs
 Miss
 Exhibitor
 (PLEASE PRINT) Post Code
 Phone No: Email:

BACK NO.
 \$2 PER HORSE/PONY
 HORSE CATALOGUE
\$2 PER CATALOGUE
 RIDER LEVY
\$2 PER EQUESTRIAN COMPETITOR
 SUBSCRIPTION
 ENTRY FEES
 SPONSOR A/C
 TOTAL
 CASH
 DIRECT CREDIT (BNZ 02-0600-0022094-00)

EXHIBITOR DECLARATION:
 i. This is a legal document. The owner/parent/guardian signing or authorising the entry must be 18 years of age or older.
 ii. The attention of exhibitors is particularly drawn to the conditions relating to the misuse of substances and the intention of the Committee to undertake testing of forbidden substances.
 iii. Exhibitor Declaration: The submission of my entries and/or participation in the competition(s), either written or by electronic means, donates that I have read and accepted the RAS and Host Association Rules & Regulations and the Association's Conditions of Entry. This also indemnifies the Host Association under the provisions of Health and Safety at Work Act 2015, and any amendments.

Signed:

EMAIL OR POST TOP COPY TO: SECRETARY, Mrs B. GILMORE, 6 LOGAN PLACE, BLENHEIM 7201. flaxbourneshow@gmail.com
ENTRY FEES MUST ACCOMPANY THIS FORM OR PAID TO ASSOCIATION BANK ACCOUNT.
NO RECEIPTS ISSUED UNLESS REQUESTED.