

LLANEDI SHOW

SHOW JUMPING ENTRY FORM

SATURDAY 10th AUGUST 2019

OFFICIAL USE ONLY	CLASS NUMBER	NAME OF HORSE OR PONY	REG. NUMBER	NAME OF OWNER	MEMBS NO.	NAME OF RIDER	MEMBS No	ENTRY FEE	
Name and Address of Owner Name: Address: Post Code STD TEL. No. SIGNATURE: DATE:								Cheques payable to: Llanedi Show Entries taken on show day only	ENTRY FEE TOTAL First Aid Cover £2.00 Sub Total TOTAL

I/We hereby agree to abide by the rules and regulations and special conditions of the show.
 I/We declare that I/We have adequate third party/public liability insurance to cover me/us and my/our exhibits.