

**PONIES ASSOCIATION (UK)**  
**SUMMER CHAMPIONSHIPS ENTRY FORM**

# CHAMPIONSHIP ENTRIES ONLY

**ALL SECTIONS OF THE ENTRY FORM MUST BE COMPLETED OTHERWISE  
 ENTRY FORMS WILL BE RETURNED**

**PLEASE ENSURE ENTRY & STABLING FORMS ARE  
 COMPLETED IN FULL AND SENT TOGETHER WITH  
 THE CORRECT REMITTANCE TO:**  
 Ponies Association (UK), Chesham House,  
 56 Green End Road, Sawtry, Huntingdon, Cambridgeshire,  
 PE28 5UY  
 Tel: 01487 830278 Fax: 01487 832086/01487 832844

CLASS NO.	HORSE/PONY NAME & P (UK) REG. NO.	RIDER/HANDLER NAME & P (UK) REG NO	NAME & DATE OF QUALIFYING SHOW	CLASS ENTRY FEE
<b>Please Note:</b> Entries must be accompanied by all fees. <b>FEES ARE NOT REFUNDABLE.</b> Cheques should be made payable to <b>PONIES ASSOCIATION (UK)</b> . Entry/Stabling Forms will only be accepted by fax with completed Credit/Debit card details. Stable bookings are subject to availability. No nomination or substitution entries are accepted. I testify the exhibits to be the property of the owner and eligible for the classes stated on the form. The Owner/Exhibitor/Producer undertakes to abide by the Regulations and Conditions of the show. By signing this form I agree to having read and understood all the Rules & Regulations of the Show.				<b>VETERINARY/MEDICAL DONATION</b> <b>STABLING/PARKING FEES</b>
<b>SIGNATURE</b> ..... <b>DATE</b> .....				<b>£10.00</b>  <b>GRAND TOTAL</b>

OWNERS ADULT MEMBERSHIP NUMBER \_\_\_\_\_

MR/MRS/MISS/MS/OTHER \_\_\_\_\_ INITIAL \_\_\_\_\_ SURNAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

POSTCODE \_\_\_\_\_ DAYTIME TEL NO. \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

ALTERNATIVE POSTAL ADDRESS \_\_\_\_\_

Please charge my:  Visa  MasterCard  Maestro  Debit  Cheque Total £ \_\_\_\_\_

Card Number: \_\_\_\_\_ Issue No: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

FEES ARE NON REFUNDABLE

Card holder Name and Address: \_\_\_\_\_

